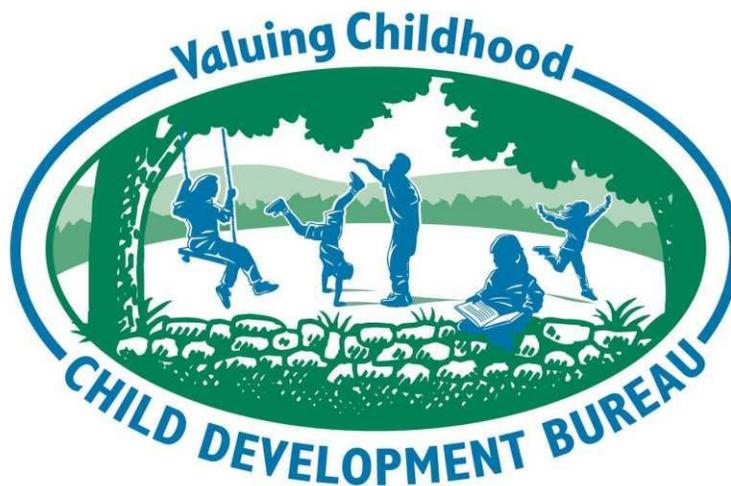




Child Care Provider Billing Application

For

State of New Hampshire



Department of Health and Human Services

**Division for Children, Youth and Families (DCYF)
Child Development Bureau (CDB)**

Provider User Manual

Date: Revised July, 2017

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NOTES

DHHS Child Development Bureau Provider Relations Telephone number:

1-800-852-3345 Extension 4242

Or

603-271-4242

1. PURPOSE

The purpose of the Child Care Provider Web Billing application is to simplify and streamline the submission of claims for child care providers. This application allows providers to view the names of eligible and authorized children and submit claims via the Internet.

Web billing offers the benefits of:

- 24 hour, 7 day a week access
- Reducing data entry errors
- Immediate notification of errors that would have otherwise caused a claim to be rejected
- The ability to view claim payment history in several different views
- The ability to view and print a variety of reports, including the Job Search Limit report and the Training Limit Report
- Eliminating mailing costs and delays associated with processing

Application Overview

Child care providers log onto a secure website. Security functionality ensures that only authorized providers are able to log onto the application and, once logged on, providers have access only to their children and claims.

The Child Care Provider Billing application allows child care providers to:

- View the names of children who are eligible and authorized for child care
- Enter and submit claims. The only information that the provider must enter on the claim screen is the arrival time and departure time, AM / PM, the billing indicator of present / absent or disaster (if authorized) and the actual amount charged for that week
- View recent payment history and view and print reports
- View and select all eligible children and time periods for which payment can be made
- Enter billing data daily (if desired), and then save for submission at the end of the week

The web application automatically calculates and displays the total hours for each day. The information displayed is: the weekly rate of reimbursement, the claimed amount, the calculated amount, the cost share amount, the service level, the parent's approved activity and the start date as well as the disability differential amount for the week, if applicable.

Months, weeks and days that are not authorized for billing are grayed out to prevent billing errors. Edits, including checking for duplicates, are performed to eliminate additional errors.

Important security notice: When a provider staff person is terminated from or leaves employment, the provider must notify DHHS to de-activate the staff person's web-billing authorization. A copy of this form is located in the front packet of this training manual.

When a provider's staff person changes their Password or PIN, an email notification is sent to the email address that the provider indicated on the User Account Request Form.

The web application will time out after 20 minutes of in-activity. You will be required to log back into the application. Any information that was saved will remain.

IMPORTANT: Claims that were saved prior to logging off the web application must be accessed from the Claim Entry and Submission tab on the Provider Home page. Do not attempt to reselect the children from the Eligible Child Claim Search.

Please Note: Several screen shots had to be divided into two shots in order to capture the entire real estate of the screen due to the scroll bars on the side and bottom of the screen.

Abbreviations

The following table lists all the abbreviations used in this document.

Abbreviations	Descriptions
BEB	Bridges Electronic Billing
CDB	Child Development Bureau
DMU	Data Management Unit
DCYF	Division for Children, Youth and Families
DHHS	Department of Health and Human Services

Type of Pages

All pages in the web application fall into one of the following categories:

Page Type	Description	Buttons Available
Search	This page accepts basic search criteria from the user to proceed further. The user may also create a new record from this page.	Search Go, Cancel, New
Result	Based on the search criteria specified by the user on the Search Page, the data is retrieved and displayed on this page. This page has links to view, edit or delete records.	First [[<], Previous [<], Next [>], Last [>]], Delete, New, Back
New	The user is sent to this when the New button is clicked from a Search or a Result page. The user can then create a new record.	Submit, Clear, Back
Edit	This page is displayed when the user selects the Edit link on the Result Page. The user can then modify data on the page.	Submit, Cancel, Back

Buttons on the Application Pages

Command Buttons	Action When Selecting the Button
Search Go	Executes a search based on the criteria entered and navigates the user to the corresponding result page with the retrieved data.
New	This button sends the user to the corresponding New page.
Delete	This button removes all records marked for deletion.
Submit	This button submits all updates to the database. On the Edit page, the database is updated with the information submitted and the page is retained. However, on the New page, the data on the page is cleared after being successfully inserted into the database.
Cancel	This button will undo the changes done to the current page.
Clear	This button clears all the fields on the current page.
First (<)	Navigates the user to the first result page.
Previous (<)	Navigates the user to the previous result page.
Next (>)	Navigates the user to the next result page.
Last (>)	Navigates the user to the last result page.
Back	This button takes the user back to the previous page.
Application Buttons	
I Agree	The user can select this button if they agree with the Rights and Responsibilities specified.
I Disagree	The user can select this button if they disagree with the Rights and Responsibilities specified.
Save Child List	This button allows the user to save the Child List.
New Claim Entry	This button allows the user to create a New Claim Entry.
Save & Get Next Child	This button allows the user to save the current record and then retrieve the next child record.
Save & Stop Entry	This button allows the user to save the current record and Stop the New Claim Entry.
Print Saved Claim Entry	This button allows the user to print the Claim List.
Submit Claim	This button allows the user to submit the selected Claims.
Delete Selection	This button allows the user to delete the selected Claims.

Sections

There are 6 sections on each screen.

1. Header section:

This section displays the information such as the current logged in user, current date, logout and home buttons.

2. Browser section:

This section displays only static data indicating the path through which the user has reached the current page.

3. Context Section

This section displays provider information or staff information depending upon the page you are in.

4. Message section:

This section displays any error specific to the page.

5. Main work section:

This section indicates the page specific functionality.

6. Footer section:

This section displays the static links, which are currently pointing to DHHS web site.

Navigation

Using a Mouse: The mouse is a tool used for navigation on the computer screen. Upon selecting the left mouse button, the users can execute a function that is prompted by the program.

Using a Keyboard:

<Tab> is used to take the control to the next prompt and move the cursor to that field or prompt.

<Shift + Tab> is used to take the control to the previous prompt, the up and down arrow keys are used to navigate between records while the right and left arrows are used to go forward and back.

<Text Field> accepts a value. In order to enter a value, click or tab to the field.

<New / Search / Clear / Ok / Back / GO / Delete> Buttons do not accept a value. They are selected using the left mouse button.

<Link> This refers to a hyperlink that will take the user to another section in the application.

Common Validations and Messages

On all pages, the asterisk (*) sign is used to indicate mandatory fields. Validations are completed when the form is submitted to verify that all the mandatory fields contain data. If any mandatory field does not contain data, the user is prompted with a message such as, "Please fill all mandatory fields. (All mandatory fields are indicated by an asterisk.)" When the user selects "OK" on the message prompt, the focus is transferred to the first mandatory field that does not contain data.

Sample Page Layout

The application page layout has the following structure and uses the standard web controls for building the web pages.

The basic design for every web page is shown below.

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES
February 19, 2014 12:36 PM
Eileen.Z.Mullen

Division for Children, Youth and Families
Child Development Bureau
Child Care Billing

Login > Provider Home > Current Claims - Result Logout

Provider Name: 93505 BROOKRIDGE CHILD CARE CENTER
Tel. No.: (603) 999-9999
Resource ID: 93505

Address: 123 GOLF COURSE Lane Concord, New Hampshire 03301-
Service: Licensed Center

Current Claims - Result
Sort/Filter
Submit Claim
Delete Selection
Select My Claims
Select All
Reset
Back
Home

Last Name	First Name	Rid Number	Billing Begin	Billing End	Actual Charged Amt	Cost Share	Calc Amt	Claim Status	Action	Select	Date Saved	Web Claim ID	Created By
JOY	CHARITY	125456897	11/25/2013	12/01/2013	00.00	00.00	00.00	No Entry	New	<input type="checkbox"/>	02/19/2014	1129772	Eileen.Z.Mullen
LOCKE	HEIDI	125785698	11/25/2013	11/29/2013	115.00	05.00	160.00	Saved	Edit	<input type="checkbox"/>	02/19/2014	1129773	Eileen.Z.Mullen
MCGREGOR	SLAYDEN	526245225	11/25/2013	11/29/2013	125.00	08.12	70.00	Saved	Edit	<input type="checkbox"/>	02/19/2014	1129774	Eileen.Z.Mullen
MINCE	RUTH	525254512	11/25/2013	11/29/2013	135.00	07.84	127.16	Saved	Edit	<input type="checkbox"/>	02/19/2014	1129775	Eileen.Z.Mullen
PREACH	CAROL	452145252	11/25/2013	11/28/2013	125.00	02.50	75.62	Saved	Edit	<input type="checkbox"/>	02/19/2014	1129776	Eileen.Z.Mullen
QUIMBY	VOX	125689785	11/25/2013	12/01/2013	00.00	00.00	00.00	No Entry	New	<input type="checkbox"/>	02/19/2014	1129777	Eileen.Z.Mullen
RIVERS	JERICO	5212521228	11/25/2013	12/01/2013	00.00	00.00	00.00	No Entry	New	<input type="checkbox"/>	02/19/2014	1129778	Eileen.Z.Mullen
RIVERS	LUMEN	568566585	11/25/2013	12/01/2013	00.00	00.00	00.00	No Entry	New	<input type="checkbox"/>	02/19/2014	1129779	Eileen.Z.Mullen
ROBERT	EVELYLN	125212525	11/25/2013	11/27/2013	25.75	01.75	24.00	Saved	Edit	<input type="checkbox"/>	02/19/2014	1129780	Eileen.Z.Mullen
WALTER	BOB	524524528	11/25/2013	11/27/2013	75.00	01.75	73.25	Saved	Edit	<input type="checkbox"/>	02/19/2014	1129781	Eileen.Z.Mullen

Sort/Filter
Submit Claim
Delete Selection
Select My Claims
Select All
Reset
Back
Home
CS02-R01

The Department's calculation of the amount of the claim is based on current data. The allowable amount of the claim may vary based on updated information which may include, but is not limited to: changes to the maximum payment rates; changes to the eligibility of the client; changes to the cost share.

NH Gov
Privacy Policy
Directory & Phone Numbers
Help

Context Summary

2. LOGON PAGE

The Logon screen allows the user to access the Web Billing (BEB) application. The user must enter their Logon Name and Password, and then select the Submit button to enter into the application. This page also allows the user to retrieve their password if it was forgotten. DHHS will post general messages for all providers when necessary. The message will include information such as, when the application will be unavailable. Please read the messages for important information from the Department. DHHS may also post important reference documents on the DHHS/DCYF Web page. Click on the "Help" button on the lower left side of the logon screen to access and open the documents.

How to get to this page?

To access this page, please click on the Internet Explorer browser of your PC. In the address bar please enter URL: <https://business.nh.gov/beb/pages/index.aspx> and select the enter key. The first screen displayed is the Logon screen, which provides information regarding the web application.

Logon Page

To Logon to the Web Application

- Enter Logon Name
- Enter Password

The screenshot shows the DHHS Web Billing Logon page in a Windows Internet Explorer browser. The browser's address bar displays the URL <https://business.nh.gov/beb/pages/index.aspx>. The page header includes the text "New Hampshire Department of Health and Human Services" and "Web Billing". The main content area features a "LOGON" section with input fields for "Logon Name" and "Password", and buttons for "Submit" and "Clear". Below these fields are links for "Forgot Password" and "Logon Help?". A "Logon Banner" is visible on the right side of the page. A "Help" button is located at the bottom left of the page. A "WARNING" message is displayed at the bottom of the page.

Click on "Help" to open the DHHS web page

DHHS will post general messages for all providers when necessary. Please read these messages for important information

To Logon to the BEB Application

- Enter Logon Name
- Enter Password
- Select the Submit Button

To Retrieve a Forgotten Password:

- Enter Logon Name
- Select the Forgot Password Link
- Hyperlink to the page listing the contact information for the BEB Help Desk

Logon Banner

LOGON Page

Banner Message:

It is very important to remember that unauthorized use of the Web Billing application is prohibited. A Logon Banner is displayed on the provider logon page.

This banner states:

****Warning**** This is a State of NH secure access system and is provided only for authorized use. Users have no implicit or explicit expectation of privacy. State and federal statutes make it a crime to attempt and/or gain unauthorized access. Unauthorized use may be subject to criminal, civil and/or administrative action.

Remember it is important to comply with the requirements in your provider agreement and to bill weekly for services provided.

Message Box:

DHHS will post general messages for all providers when necessary. The message will include information such as, when the application will be unavailable. DHHS may also post important informational documents on the DHHS/DCYF Web page. In order to access these important documents, click on the "Help" button on the lower left side of the log on screen just under the scenery picture to access the DHHS web page and open the document.

Also look for additional messages posted at the bottom of the Provider Home Page for provider service specific messages.

Forgot Password:

Q & A:

QUESTION: I forgot my password. How many times can I try to enter it before my account is locked? What can I do to prevent my account from locking?

ANSWER: The application will lock your account after five unsuccessful attempts. Do not try more than five times. A good rule of thumb, is to try three times and if unsuccessful, click on Forgot Password? The application will bring up the Forgot Password screen. By answering your hint questions, the application knows that you are an authorized user and will then allow you to change your password.

Field / Button / Link	Type	Description
Logon Name	Data Entry	The user must enter their unique Logon Name in the text box. This is a mandatory field and cannot be left blank. The Logon Name must be in the format: FirstName.MiddleInitial.LastName this is case sensitive .
Password	Data Entry	The user must enter their Password in the text box. This is a mandatory field with a minimum length of 8 and a maximum length of 25 characters and cannot be left blank. The Password is case sensitive. Must contain at least two alpha characters and one numeric digit.
Submit	Button	This button submits the information entered by the user on the Logon page. The application validates the information entered. If the Logon Name and Password are correct then user is logged into the Application, otherwise an error message is displayed. If the user has successfully logged into the application for the very first time, the user is taken to the Change Temporary Password screen (see page 10). On the second logon the user is taken to the Set Hint Questions screen (see page 11). On every subsequent successful logon, the Provider Rights and Responsibility Page (see page 20) is displayed. The user password will automatically expire after 90 days. If the user does not change their password within 90 days, after the 90th day the password will expire and user is taken to the Hint Question screen (see page 13). The application will automatically lock the user account after five (5) consecutive times using as invalid Logon Name / Password. The error message " Your account has been locked. Please click on Logon Help? " is displayed to the user. The application will automatically deactivate a user when the user has not accessed the application after 90 days. The error message "This account has been inactivated for non-use. Please contact Provider Relations for further information" is displayed to the user.
Forgot Password?	Link	This link can be used to reset the password if the user has forgotten it. Refer to section on Forgot Password/PIN (see page 13) for details.
Logon Help	Link	This is a link to the page that lists the Help Desk contact information. Contact the Help Desk for assistance with any problems logging on to the application.

First Time Logon / User Activation – Change Temporary Password

When the user successfully logs into the application for the first time, they are directed to the Change Temporary Password page. The user must change the temporary password assigned by the Administrator on this page.

Change Temporary Password Screen - First Logon Attempt

Change Password

* Old Password :

* New Password :

* Confirm Password :

Change Hint

* Mother's Maiden Name :

* Birth Date :

Hint Question 1 :

Hint Answer 1 :

Hint Question 2 :

Hint Answer 2 :

Change PIN

* Old PIN :

* New PIN :

* Confirm PIN :

The Change Password section is enabled for all users. The Change PIN section is enabled for users who are authorized to submit claims.

To Change Temporary Password and PIN

- Enter all Mandatory Information
- Select the Submit button

First Time Logon / User Activation – Change Temporary Password

1. When the user logs into the application for the very first time, it is mandatory for the user to change the temporary password assigned by the Application Administrator to a password of their choice.
2. The user must enter the old password (provided by Application Administrator), their new password and retype the new password for confirmation. The New Password and Confirm Password must be the same; otherwise an error message is displayed.
3. If a valid password is entered, the application will change the password, and take the user back to the Logon Page where the user must enter their logon name and new password.

Second Logon / User Activation - Set Hint Questions

When the user successfully logs on for the second time, they are directed to the Set Hint Questions page. The user must change the Hint Questions before using the application.

Set Hint Questions Screen

The screenshot shows a web form titled "Set Hint Questions Screen" with three main sections: "Change Password", "Change Hint", and "Change PIN".

- Change Password:** Contains fields for "Old Password", "*New Password", and "* Confirm Password". A red arrow points to the "Change Password" header, and a callout box states: "The Change Password is disabled for a user who has logged into the application for the second time."
- Change Hint:** Contains fields for "* Mother's Maiden Name", "* Birth Date", "Hint Question 1" (a dropdown menu), "Hint Answer 1", "Hint Question 2" (a dropdown menu), and "Hint Answer 2". A callout box titled "To Set Hint" lists: "Enter all Mandatory Information" and "Select the Submit button".
- Change PIN:** Contains fields for "* Old PIN", "* New PIN", and "* Confirm PIN". A red arrow points to the "Change PIN" header, and a callout box states: "The Change PIN section is enabled and mandatory for users who have the authority to submit claims."

Set Hint Questions Information

1. When the user logs into the application for the second time, it is mandatory for the user to set the Hint Questions.
2. The Change Password section is disabled.
3. The Change PIN section is enabled and mandatory for users who have the authority to submit claims.

Successful Logon

After successful Logon using the user created password:

The provider is directed to the [Provider Rights and Responsibilities Page](#) (see page 20).

Forgot Password / PIN

This page allows the registered user to change their forgotten password by answering the hint questions on the Forgot Password page.

After answering the questions correctly, the Forgot Password / PIN page is displayed. The user is asked to enter the New Password / PIN. The Hint section as well as the Old Password / PIN section is disabled.

Select the Forgot PIN link on the Provider Home Page to retrieve a forgotten PIN number.

Forgot Password / PIN – Hints Questions Screen

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES
April 15, 2010 02:10 PM
Trainee.-Nineteen

Division for Children, Youth and Families
Division for Juvenile Justice Services
Child Development Bureau

Web Billing

Answer Hints [Logout](#)

Forgot Password

* Mother's Maiden Name :

* Birth Date :

Hint Question 1 : Favorite Color

* Hint Answer 1 :

Hint Question 2 : Favorite Animal

*Hint Answer 2 :

To Retrieve a Forgotten Password / PIN:

- Provide answer to Mother's Maiden Name
- Provide answer to Birth Date (mm/dd/yyyy)
- Provide answer to Hint Question 1
- Provide answer to Hint Question 2
- Click on the Submit Button
- One of the two Hint Question answers must be correct
- Mother's Maiden Name and Birth Date must be correct

Q & A

QUESTION: Why do I have to answer all four questions on the forgot password screen?

ANSWER: By answering your hint questions, the application knows that you are an authorized user and will then allow you to change your password. All four questions must be answered as a security measure. It is very important to keep your hint questions confidential.

NOTE: The screen print is just an example; your questions may be different.

Forgot Password / PIN Update Screen

Change Password

* Old Password :

* New Password :

* Confirm Password :

Change Hint

* Mother's Maiden Name :

* Birth Date :

Hint Question 1 :

* Hint Answer 1 :

Hint Question 2 :

* Hint Answer 2 :

Change PIN

* Old PIN :

* New PIN :

* Confirm PIN :

To reset a forgotten Password:

- Enter New Password
- Retype New Password
- Select Submit Button

To reset a forgotten PIN:

- Enter New PIN
- Retype New PIN
- Select Submit Button

If the user forgets their password:

1. The user must enter their Logon Name on the Logon page of the application and select the Forgot Password link to set a New Password. The application will display the Forgot Password page.
2. The user must correctly answer one of the two user-selected hint questions and two standard questions, which are Mother's Maiden Name and Birth Date.
3. If the answers are valid and match the database stored answers the application will display the Forgot Password / PIN page.
4. The Change Password section is enabled and the Change Hint and Change PIN sections are disabled.
5. The Old Password textbox is disabled. The user will only be able to enter a new password and then confirm the password to set the new password.
6. The user cannot reuse a previous password until 10 other passwords have been used. The application stores each password and will not allow a user to filter back through previously used passwords until after 10th time.
7. The application will direct the user to the Logon screen where the user must logon using their new password.
8. When the password is changed, an e-mail notification is sent to the email address that the provider indicated on the User Account Request form.
9. If the user enters the hint answers wrong three times consecutively, the user is taken to the application's logon page.

If the user forgets their PIN number:

1. The user must log into the application.
2. The Forgot PIN link is enabled only if the user has the authority to submit claims.
3. The user can select the Forgot PIN link from the Home page, which will display the Forgot Pin screen.
4. The user must correctly answer the two user-selected hint questions and two standard questions, which are Mother's Maiden Name and Birth Date (mm/dd/yyyy).
5. If the answers are valid and match the database-stored answers, the application will display the Forgot PIN page.
6. The Old PIN textbox is disabled. The user will only be able to enter a new PIN and then confirm the PIN to set a new PIN.
7. If user enters hint answers wrong three times consecutively, the user is returned to the application's logon page.
8. When the PIN is changed, an e-mail notification is automatically sent to the email address that the provider indicated on the User Account Request form.

Password Information Table

Field / Button / Link	Type	Description
Change Password		
Change Password	Check Box	The Change Password section is enabled for the user to the change a password. When user selects the Forgot Password link, this section is enabled. The Change Hint and Change PIN sections are disabled. This is case sensitive.
Old Password	Enterable	The first time a user logs onto the application they must enter the temporary password. In subsequent logons this field is disabled.
New Password	Enterable	<ul style="list-style-type: none">• The user must enter the new password in the text box.• This is a mandatory field with a minimum length of 8 and a maximum length of 25 characters and cannot be left blank• The Password is case sensitive.• Must contain at least two alpha characters and one numeric digit
Confirm Password	Enterable	The user must re-enter the New Password. This must be the same as the New Password otherwise an error message is displayed.
Reuse of Password		The application will not allow a user to reuse a specific password until at least 10 other passwords have been used.

Change Hint		
Change Hint	Enterable	The Change Hint section is enabled for the user to set the Hint Questions. The Change Password and Change PIN sections are disabled.
Mother's Maiden Name	Enterable	Accepts the user's answer for their Mother's Maiden Name up to 30 characters. This is a mandatory field.
Birth Date	Enterable	Accepts the user's answer for Birth Date in mm/dd/yyyy format. This is a mandatory field.
Hint Question 1	Enterable	Allows selection of Hint Question 1 from the drop down list.
Hint Answer 1	Enterable	Accepts the user's answer for Hint Question 1 up to 30 characters. This is a mandatory field.
Hint Question 2	Enterable	Allows selection of Hint Question 2 from the drop down list.
Hint Answer 2	Enterable	Accepts the user's answer for Hint Question 2 up to 30 characters. This is a mandatory field.
Change PIN		
Change PIN	Check Box	The Change PIN section is enabled for the user to change a PIN, when user selects the Forgot PIN link. The Change Password and Change Hint sections are disabled.
Old PIN	Enterable	The original PIN must be entered in the text box. This is a mandatory numeric field requiring 4 digits.
New PIN	Enterable	The user must enter the new PIN in the text box. This is a mandatory numeric field requiring 4 digits.
Confirm PIN	Enterable	The user must re-enter the New PIN. This must be the same as the New PIN; otherwise an error message is displayed.
Submit	Button	The user must select this button to submit the information entered on the page. Once validated, the PIN is changed otherwise an error message is displayed.

Password Expiration

Password Expiration Information

1. The user password will automatically expire after 90 days. The user must change the password within 90 days. The application will remind the user fifteen (15) days before the password expires after they Logon. The message will appear on the context area of the Provider Home Page.
2. If the user does not change their password within 90 days, after the 90th day the password will expire. The user will then have to change their password to log onto the application.
3. The Hint Question screen is displayed to the user. The two hint questions supplied by the user at the time of setting their password are displayed. The user must enter a valid answer for one of the two questions and also supply an answer to the Mother's Maiden name and Birth Date. If the answers are valid and match with the database stored answers, the user is allowed to change the password by using the Change Password screen.

4. After the password has been changed, an e-mail notification is automatically sent to the email address that the provider indicated on the User Account Request form.
5. The user is directed to the Logon screen where the user must log on with their new password to access the application.
6. The user will automatically become inactivated after 90 days of non-use. The user must email the Help Desk by using the email address posted in the message box to request reactivation of their account.

Inactive Users Automatically Deactivated

In order to maintain security and the integrity of the application, user access is monitored by recording the user's last login date and time.

The web application will automatically deactivate any user who has not logged onto the web application for more than 90 days.

A message will display: "This account has been inactivated for non-use. Please contact Provider Relations at 271-4242 or 271-7313 for further information".

The user must contact DHHS at one of the numbers above to have the account reactivated. The user will not be able to access the application until the password is reset by a DHHS administrator. DHHS will verify

New Hampshire Department of Health and Human Services

Division for Children, Youth and Families
Division for Juvenile Justice Services
Child Development Bureau

Web Billing

LOGON

This account has been inactivated for non-use. Please contact Provider Relations at 271-4242 or 271-7313 for further information.

Logon Name : Peter.P.Pann

Password :

[Forgot Password?](#)
[Logon Help?](#)

IMPORTANT: If you get a blank page or have trouble logging on: Click on "Help" on the bottom of this screen under the NH photo (not the Logon Help?) to access the DHHS Web Billing Help page which contains a document entitled

Welcome to the DHHS Web Billing Application. This application will allow authorized DHHS providers to submit invoices, view payment history and generate online reports. To use this application, please provide your logon information and click on the submit button.

NH Gov Privacy Policy Directory & Phone Numbers Help

4.0.0.8 BEB-NHE

security questions before reactivation can occur.

Change Hints

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES
April 25, 2017 09:41 AM
Ruth.-Dorothy

Division for Children, Youth and Families
Child Development Bureau

Child Care Billing

login > Provider Home Logout

Provider : 98057 Brookridge Child Care Center Service : Licensed Center

Provider Name: 98057 Brookridge Child Care Center Tel. No.: (603) 225-2522 Resource ID: 98057
Address: 123 GOLF COURSE Lane Concord, New Hampshire 03301- Service: Licensed Center

- Eligible Child Claim Search
- Claim History
 - View In-Process Information
 - View Current Payment
 - View Last (5) Payments
 - Remittance Advice
 - Change Password
 - Forgot PIN
 - Change PIN
 - Change Hints
 - Forms Library
- Claim Entry and Submission
- Reports
 - Submitted Claims Report
 - Summarized Payment Report
 - Training Limit Report
 - Absentee Usage Report
 - Create / Maintain Group
 - Manage Groups

Hints can be changed at any time by clicking on:
Change Hints

PRV-HME

The Change Hints link allows the user to change their hints by selecting this link. Selecting this link will bring up the Change Hints screen. Users are unable to change their password from the Change Hints screen.

It is important for security reasons to change your hints if you feel that the Hints that you have entered have been compromised.

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES
April 28, 2011 01:42 PM
Wendy.A.Locke

Division for Children, Youth and Families
Child Development Bureau

Child Care Billing

Change Password/Pin/Hints Logout

Submit Clear Back Home

Change Password

* Old Password :
* New Password :
* Confirm Password :

Change Hint

* Mother's Maiden Name :
* Birth Date :
Hint Question 1 :
* Hint Answer 1 :
Hint Question 2 :
* Hint Answer 2 :

Change PIN

* Old PIN :
* New PIN :
* Confirm PIN :

Submit Clear Back Home

NH Gov Privacy Policy Directory & Phone Numbers Help

To change Hints you must enter the first two questions

Remember: When changing your hints, you must always enter Mother's Maiden Name and Birth Date (mm/dd/yyyy).

Change Password

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES
April 28, 2011 02:03 PM
Wendy A. Locke

Division for Children, Youth and Families
Child Development Bureau

Child Care Billing

Change Password/Pin/Hints [Logout](#)

Change Password Change Password *Required Fields

* Old Password :
* New Password :
* Confirm Password :

Change Hint

* Mother's Maiden Name :
* Birth Date :
Hint Question 1 :
* Hint Answer 1 :
Hint Question 2 :
* Hint Answer 2 :

Change PIN

* Old PIN :
* New PIN :
* Confirm PIN :

BEB-PPH

NH Gov Privacy Policy Directory & Phone Numbers Help

Change Password

Change Hints

Change PIN

The Change Password screen allows the user to change his/her password by entering the Old Password, entering the New Password and Confirm Password by entering the new password again.

The Change Hint section is enabled on this screen. Users can change their Hints from this screen as well as through the Change Hint screen.

It is important for security reasons to change your Password if you feel that the Password that you have entered has been compromised.

NOTE: If the error message "Error has occurred. Please try again." appears in the message tool bar when the user is attempting to change the password, please retype the password. The error is indicating that the user typed the current password incorrectly.

IMPORTANT:

The application will not allow a user to reuse a specific password until at least 10 other passwords have been used. The new password must not be one of the last 10 passwords already used.

A password must be active for at least one 24-hour period, before the password can be changed again, even if the password has never been used before.

Change Pin

The Change Pin screen allows the user to change his/her pin by entering the Old Pin, entering the New Pin and Confirm Pin by entering the new Pin again.

It is important for security reasons to change your Pin if you feel that the Pin that you have entered has been compromised.

Unsuccessful Logon Attempts

The application will automatically lock the user account after five (5) consecutive attempts to logon. The error message "Your account has been locked. Please click on Logon Help?" is displayed to the user.

Logon Screen

New Hampshire Department of Health and Human Services

Division for Children, Youth and Families
Division for Juvenile Justice Services
Child Development Bureau

Web Billing

Welcome to the DHHS Web Billing Application. This application will allow authorized DHHS providers to submit invoices, view payment history and generate online reports. To use this application, please provide your logon information and click on the submit button.

LOGON

Your account is no longer active. Please click on [Logon Help?].

Logon Name :

Password :

[Forgot Password?](#)
[Logon Help?](#)

IMPORTANT: If you get a blank page or have trouble logging on: Click on "Help" on the bottom of this screen under the NH photo (not the Logon Help?) to access the DHHS Web Billing Help page which contains a document entitled

WARNING This is a State of NH secure access system and is provided only for authorized use. Users have no implicit or explicit expectation of privacy. State and federal statutes make it a crime to attempt and/or gain unauthorized access. Unauthorized use may be subject to criminal, civil and/or administrative action.

NH Gov Privacy Policy Directory & Phone Numbers Help

4.0.0.8 BEB-HME

Unsuccessful Logon Attempt Information

1. The user is required to contact the Help Desk to reset the password. The user will not be able to use the application again until the password has been reset. The application administrator will activate the user and will assign a new temporary password to the user.
2. Once the administrator resets the user password, the user must again log on to the application with the new temporary password.
3. Once the user logs into the application with the new temporary password, the user must change the password using Change Password page. Refer to the Change Temporary Password section on [page 10](#).
4. Once password is changed successfully, the user is directed to the Logon screen where the user must log on with the new password in order to use the application.

3. PROVIDER HOME PAGE

After successfully logging into the application, the user is directed to the Responsibilities page. This page indicates the terms and conditions regarding policy, procedures, confidentiality and security that the provider **must agree** to before accessing information.

If the provider agrees with the terms and clicks on the **I Agree** button, they are directed to the Provider Home Page. Depending on the roles of the provider, they are able to access these pages:

Module 1 – Eligible Children and Invoice Periods

Module 2 – Claims Entry and Invoice Submission

Module 3 – Claims History

Module 4 – Reporting

Module 5 - Groups

Provider Responsibilities Page

How to get to this page?

After successfully logging into the application, the user is directed to the Provider Responsibilities page. If the user selects the "I agree" button, the Provider Home page is displayed.

Responsibilities Page

The screenshot shows the 'Responsibilities Page' interface. At the top, it displays 'NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES' and the date 'April 21, 2010 01:27 PM'. The page title is 'Web Billing'. Below the title, there is a navigation bar with 'Home > Responsibilities' and a 'Logout' button. The main content area is titled 'Responsibilities' and contains a text box with the following text: 'I have signed the Provider Web Billing User Account Request Form. I understand the terms and conditions of the Provider Agreement describing my responsibilities relative to using the Provider Billing Application.' Below the text box are two buttons: 'I Agree' and 'I Disagree'. Two callout boxes provide instructions: one for the 'I Agree' button and one for the 'I Disagree' button.

Callout 1 (I Agree):

- Click on the I Agree button
- The Provider Home Page is displayed

Callout 2 (I Disagree):

- Click on the I Disagree button
- The Logon Page is displayed

Field / Button / Link	Type	Description
Rights and Responsibilities	Display	Displays the Rights and Responsibilities of the provider.
I Agree	Button	The user can select this button if they agree with the Rights and Responsibilities and proceed to the Provider Home page.
I Disagree	Button	The user can select this button if they disagree with the Rights and Responsibilities, the application will log the user out and return to the Logon Page.

Provider Home Page

Provider Home Page

The screenshot shows the 'Child Care Billing' interface for the 'NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES'. The page title is 'Child Care Billing' and the user is logged in as 'Provider Home'. The provider information is displayed as '98057 Brookridge Child Care Center' with a 'Service' of 'Licensed Center'. The page is divided into several sections:

- Eligible Child Claim Search**: Includes links for 'View In-Process Information', 'View Current Payment', 'View Last (5) Payments', and 'Remittance Advice'.
- Claim History**: A section for viewing past claims.
- Claim Entry and Submission**: Includes links for 'Submitted Claims Report', 'Summarized Payment Report', 'Training Limit Report', and 'Absentee Usage Report'.
- Reports**: Includes links for 'Create / Maintain Group' and 'Manage Groups'.
- User Management**: Includes links for 'Change Password', 'Forgot PIN', 'Change PIN', 'Change Hints', and 'Forms Library'.

Callouts provide additional information:

- 'Click on Logout to exit the application' points to the user profile icon.
- 'Displays the Provider's Information' points to the provider details section.
- 'Select the specific Provider and the Service each time' points to the dropdown menus for Provider and Service.
- 'Click on the hyperlink to access the various Modules. Links are enabled / disabled depending on the rights of the user' points to the main menu items.

IMPORTANT: Multiple Resource Numbers:

You must select the Provider and the Service from the drop down box if you have multiple sites or if you are enrolled as both an Employment Related and Preventive and Protective child care provider. By selecting the specific site, the application will retrieve only the children for that site.

You can change sites from this page to view Claims History and Reports for multiple sites including Employment Related and Preventive and Protective child care.

Messages specific to each service (Employment Related child care and Preventive and Protective child care) will display and will be different than the General Message on the Logon page. These messages will be displayed at the bottom of the Provider Home page. These messages are important!!!

Q & A

QUESTION: I selected my children from Eligible Child Claim Search. I want to bill for them, but they are gone? It states No Records Found. Where did they go?

ANSWER: Children that are selected from the Eligible Child Claim Search, appear on the Child Claim Search screen after the Save Child List button is clicked. To access these children that have previously been saved, you MUST click on Claim Entry and Submission on the Provider Home page. The children will appear on the Current Claims Result Screen.

Eligible Child Claim Search

The provider can search for a child claim By Child, By All Children or by Group Name. The result is shown on the Child Search – Result page.

Note: Searching by billing period for all eligible children allows the provider to enter data for multiple children more efficiently than by selecting children one at a time.

How to get to this page?

The provider must select the Eligible Child Claim Search link on the Provider Home page.

Child Claim Search Screen

The screenshot shows the 'Child Claim Search Screen' for the New Hampshire Department of Health and Human Services. The page header includes the date 'April 25, 2017 10:41 AM' and the user 'Ruth., Dorothy'. The main heading is 'Child Care Billing'. The page contains a search form with the following elements:

- Search by Criteria:** Includes radio buttons for 'By Child' (selected), 'By Group', and 'By Billing Week'. Below this is a 'Begin Date of Billing Week (Week Starts on Monday)' dropdown menu.
- Bill Saved Claims in New Status:** Includes a checkbox for 'Include All Claims in New Status'.
- Review/Edit Saved but Not Submitted Claims:** Includes a checkbox for 'Include All Claims in Saved Status'.
- Resubmit Adjusted Claims:** A radio button option that is selected.

Annotations on the screenshot include:

- A circle around the 'By Billing Week' radio button with the text 'Select the Billing Week' and an arrow pointing to the radio button.
- A circle around the 'Resubmit Adjusted Claims' radio button with the text 'Resubmit Adjusted Claims Enabled' and an arrow pointing to the radio button.
- A box on the right side containing a list of steps to perform a search, with red lines connecting the steps to the corresponding form elements.

To perform a Child Claim Search

- Select Search by Criteria
- Select either the By Child or By Group option
- Select All Children or individual child
- Select Begin Date of Billing Week
- Click on the Search Button

Child Claim Search Information

There are three search options and a Resubmit Adjusted Claims option. The Search Options are: Search by Criteria, Bill Saved Claims in New Status and Review/Edit Saved but not Submitted Claims.

Search by Criteria

- The provider can search for a specific child's claim by entering the required search information.
- The user can select the By Child option if the search is based on a single child and the start date of the billing week.
- The user can select the ALL Eligible Children option if the search is based on all eligible children and the start date of the billing week.
- The user can select the By Group option if the search is based on a specific group and the start date of the billing week.

Remember to select child(ren) either by clicking by Child or By Group, and then select the Date. Don't forget to click in the toggle button then select either ALL Eligible Children or a specific child.

Billed Saved Claims in New Status:

Click on Bill Saved Claims in New Status to begin claim entry for children that have been previously saved by you but have not had any detail entered on the claim entry screen. Click to include ALL claims. These claims are all claims that have been previously saved by all users allowing you to view claims that anyone else saved as well as your own claims.

Review/Edit Saved but not Submitted Claims:

To review or edit claims saved by you but have not yet been submitted. Click to include ALL claims. These are all claims that have been previously saved by all users allowing you to view claims that anyone else saved as well as your own claims.

Resubmit Adjusted Claims option:

When the Resubmit Adjusted Claims is enabled (not grayed out) it means that DHHS has adjusted previously submitted claims and these claims **must** be reviewed, corrected if necessary, **AND** resubmitted within 90 calendar days of the date of service in order for payment to be made.

Click on Resubmit Adjusted Claims and the application will open the Claim Entry – Edit page. Each claim that requires review and or correction will appear in the driver flow in alphabetical order by child name.

The Reset button will clear out any data that has been selected.

Field / Button / Link	Type	Description
Search By Criteria	Radio Button	The user must select this option to activate the search option.
By Child	Radio Button	The user can select this option if the search is based on a single child and the start date of the billing week.
Child Name	Drop down list	Allows selection of the child's name from a dropdown list. This is a mandatory field.
Begin Date of Billing Week	Drop down list	Allows selection of the start date of the billing week from the dropdown list. This is a mandatory field.
All Eligible Children	Drop down list	The user can select this option if the search is based all the eligible children.

Field / Button / Link	Type	Description
Begin Date of Billing Week	Drop down list	Allows selection of the start date of the billing week from the dropdown list. This is a mandatory field.
By Group Name	Radio Button	The user can select this option if the search is based on a specific group and the start date of the billing week.
Begin Date of Billing Week	Drop down list	Allows selection of the start date of the billing week from the dropdown list. This is a mandatory field.
Bill Saved Claims in New Status	Radio Button	The user can select this option if the search is based on all claims in New Status that have been previously saved.
Review/Edit saved claims but not submitted claims	Radio Button	The user can select this option if the search is based on all claims in the saved status that have not been previously submitted.
Resubmit Adjusted Claims	Radio Button	The button will be activated (not grayed out) when there are DHHS adjusted claims to be reviewed. If the button is grayed out, there are no adjusted claims to be reviewed.
Search	Button	The user can select this button to search for the child, based on the search information specified by the user.
Clear	Button	This button clears the data entered on the screen and allows the user to re-enter information.
Back	Button	This button takes the user back to the previous page.
Reset	Button	This button will clear out any data that has been selected.

➤ **Child Claim Search - Result**

When a search is made, the search result is displayed based on the search criteria specified by the user. A maximum of 15 records is displayed at one time. The page navigation bar is used to navigate to the next set of records. The user can select the child records and save child list or create a new claim entry.

The Result page is displayed depending on the type of child care authorized:

1. If it is employment related child care, then the RID Number, Link Begin Date and Link End Dates are displayed.
2. If it is preventive or protective child care, then the Child's ID, Auth. ID, Auth. Begin Date and Auth. End Dates are displayed.

How to get to this page?

The user enters the search information in the Child Claim Search page and clicks the **Go button**.

Child Claim Search - Result Screen of Employment Related Child Care

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES
February 19, 2014 11:23 AM
Eileen.Z.Mullen

Division for Children, Youth and Families
Child Development Bureau

Child Care Billing

Login > Provider Home > Eligible Child Claim Search > Child Claim Search - Result Logout

Provider Name: 93505 BROOKRIDGE CHILD CARE CENTER
Tel. No.: (603) 999-9999
Resource ID: 93505
Address: 123 GOLF COURSE Lane Concord, New Hampshire 03301-
Service Dates : 12/02/2013 To :12/08/2013
Criteria :-- All Eligible Children--
Service: Licensed Center

Child Claim Search - Result Save Child List New Claim Entry Back Home

Last Name	First Name	Rid Number	Link Begin	Link End	Select
JOY	CHARITY	125456897	01/01/2012		<input type="checkbox"/>
		125785698	01/01/2013		<input type="checkbox"/>
		526245225	11/01/2012		<input type="checkbox"/>
		525254512	01/01/2012		<input type="checkbox"/>
		452145252	11/01/2012		<input type="checkbox"/>
		125689785	07/01/2013		<input type="checkbox"/>
		5210521228	07/01/2013		<input type="checkbox"/>
		568566585	07/01/2013		<input type="checkbox"/>
		125212525	01/01/2012		<input type="checkbox"/>
		524524528	12/01/2012		<input type="checkbox"/>
		455252125	01/01/2012		<input type="checkbox"/>

1 of 1 All

Save Child List New Claim Entry Back Home CS01-R01

Click on the Select Child check box or click on the 'All' check box to select the children.
Click the Save Child List button to save the child list.
Click the New Claim Entry button to create a New Claim entry for the selected records.

Displays the Provider's Information

If the child care type is employment related, the RID Number, Link Begin and Link End Dates are displayed. If the child care type is Preventive or Protective, the Auth ID, Auth Begin and End Dates are displayed.

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES
February 19, 2014 12:22 PM
Eileen.Z.Mullen

Division for Children, Youth and Families
Child Development Bureau

Child Care Billing

Login > Provider Home > Eligible Child Claim Search > Child Claim Search - Result Logout

Provider Name: 93505 BROOKRIDGE CHILD CARE CENTER
Tel. No.: (603) 999-9999
Resource ID: 93505
Address: 123 GOLF COURSE Lane Concord, New Hampshire 03301-
Service Dates : 11/25/2013 To :12/01/2013
Criteria :JOY, CHARITY
Service: Licensed Center

Child Claim Search - Result Save Child List New Claim Entry Back Home

Last Name	First Name	Rid Number	Link Begin	Link End	Select
JOY	CHARITY	125456897	11/29/2013		<input type="checkbox"/>
JOY	CHARITY	125456897	01/01/2012	11/27/2013	<input type="checkbox"/>

1 of 1 All

Save Child List New Claim Entry Back Home CS01-R01

Child Claim Search - Result screen indicates two rows for one child

➤ Child Claim Search – Result Screen

The web application requires users to select each row for the same child when there is a lapse in eligibility during the claim week.

Users can only bill for the dates within the link span, thus multiple rows for the same child.

For Example:

Charity Joy is linked from 1-1-2012 through 11-27-2013 and then again from 11-29-2013 to current. The user must bill on two separate claims, and will not be able to bill for 11-28-2013 (child not linked/not eligible).

Child Claim Search Result Information

1. This page displays the search criteria, billing period, the child selected, and the context information.
2. The Save Child List button must be clicked for each page of the result screen. If the provider does not click this button, the children will not be saved in the order selected.

Field / Button / Link	Type	Description
Service Dates	Display	Displays the Billing Period Start Date.
To	Display	Displays the Billing Period End Date.
Criteria	Displays	Displays the search information selected by the user.
Child Search – Result		
Last Name	Display	Displays the Last Name of the child.
First Name	Display	Displays the First Name of the child.
Child ID / RID Number	Display	Displays the: <ul style="list-style-type: none"> • RID Number (recipient identification number) if the child care type is employment related • Child ID (identification number) if the child care type is preventive or protective
Auto #	Display	Shows the Auto ID # (Authorization Identification Number).
Auth. Begin / Link Begin	Display	Displays the: <ul style="list-style-type: none"> • Link Begin Date if the child care type is employment related • Auth. Begin Date if the child care type is preventive or protective
Auth. End / Link End	Display	Displays the: <ul style="list-style-type: none"> • Link End Date if the child care type is employment related • Auth. End Date if the child care type is preventive or protective
Select	Checkbox	Allows selection of the child claim records.
All	Checkbox	The provider can select all the children on the page that they want to save for the claim entry batch.
Save Child List	Button	<ul style="list-style-type: none"> • At least one child must be selected • Saves the selected children • Allows the user to select ALL children • Sets the child list for the session
Claim Entry – New	Button	Opens Claim Entry – New page <ul style="list-style-type: none"> • At least one child must be selected • Saves the selected children • Sends the user to the New Page to allow entry of claims for the selected child/children

➤ **Claim Entry – New / Edit**

This page allows the provider to enter a claim for the eligible child selected. This page displays the selected child and billing period.

All Claim information is located in the grid at the top of the screen. The information includes: Child's Name, RID Number, Created By (this is the user that logged in to enter claims), Web Claim ID, Link Begin Date, Link End Date, the parents approved Activity and Start Date, Weekly Rate, Total Hours, Claimed Amount, Calculated Amount, Cost Share Amount, Disability Amount (if applicable) and Service Level.

The activity that is shown on the claim entry-new screen is the activity that was effective on the Monday of the selected week. A parent's activity can change on any specific day in the week. Once the claim is saved, the parent's activity will be re-evaluated. If the activity changed during the week, the activity that is in effect on that last date billed in that week will now be the activity that is displayed on the claim entry-edit screen.

The child's cost share amount automatically displays when the page is launched.

When the Update Rate Info Button is clicked, the application will calculate the claim and the information will display at the top of the screen. If this button is not clicked, the amounts will populate with zero.

The three-occurrence of hours and minutes for each day are totaled and then rounded up to arrive at total hours for the day. The total hours for each day are summed up for the entire claim.

When the provider saves the claim, the claim is retained in the current batch and is identified with a status of "Saved". Once the claim is saved, the provider can enter a claim for the next child for the same billing period, if another child has been selected by clicking on the **Save and Get Next Child** button.

Providers can also enter claims one child at a time.

Providers can stop entry of a claim at any time by selecting the **Save & Stop Entry** button. When this button is selected, the provider is presented the Current Claims Result screen, which displays all of the claims, which have not yet been submitted. If required, the provider can edit or delete the claims that have a "Saved" status.

There could be a possible difference between the actual charged amount and calculated amount displayed on this page.

The Skip This Claim button allows the user to skip the child for the particular week selected and does not require the user to enter information. For example: If the child was selected, but did not attend that week, this function would allow you to simply skip the child and go on to the next child in the list.

The Skip Child button allows the user to skip this child if there are multiple weeks for the child. It will then populate the next child in the list.

The **F2 key** on the keyboard allows the user to go directly to the Actual Amount Charged field without having to tab.

NOTE:

Claim Entry – Edit for Resubmission of Previously Submitted Claims

Previously submitted claims that were submitted incorrectly can be corrected and resubmitted in the web billing application. The Resubmit Adjusted Claims option notifies the provider that DHHS has adjusted previously submitted claims. These claims **MUST** be reviewed and corrected if necessary, and resubmitted no later than 90 calendars from the date of service in order for payment to be made. Claims are adjusted by DHHS when the paid claim was submitted incorrectly by the provider OR the claim was paid incorrectly due to DHHS incorrect eligibility. Claims can be corrected on the web by clicking on Resubmit Adjusted Claims. Once clicked the Claim Entry – Edit screen will open showing the previously submitted claim as it was previously billed, including the start/end times and billing indicator for each claim day and the actual amount charged. The information must be reviewed and corrected if necessary, and resubmitted. If the claim is not resubmitted, payment will NOT be made. All claims that require an adjustment will appear in the driver flow, in alphabetical order by child’s last name.

Current Claims Result Screen - Resubmission of Previously Submitted Claims

Another option is to view ALL the claims previously submitted AND adjusted by DHHS. To view all DHHS adjusted claims go to the Provider Home page and click on Claim Entry and Submission. You will be able to identify the adjusted claims that require review and possible correction by identifying ‘Edit’ in the Action Column and a DHHS individual’s name in the Created By column. Click on ‘Edit’ and the Claim Entry – Edit screen will open. Repeat the process until all adjusted claims have been reviewed, corrected if necessary, and saved. Remember claims **MUST** be resubmitted within 90 calendar days in order for payment to be made.

NOTE: It is important to remember that you cannot submit a claim for payment until the parent or guardian signs the attendance record for the week. A full original signature is required each week.

How to get to this page?

- Clicking on the New Claim Entry button from the Child Claim Search Result page takes the user to the Child Entry - New page.
- Clicking on the New Link in the “Action” column on the Current Claims – Result page takes the user to the Child Entry - New page.
- Clicking on the Edit Link in the “Action” column on the Current Claims – Result page takes the user to the Child Entry - Edit page.

Claim Entry – New / Edit Screens

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES

Division for Children, Youth and Families
Child Development Bureau

Child Care Billing

Ruth.-Dorothy

login > Provider Home > Eligible Child Claim Search > Child Claim Search - Result > Claim Entry - New Logout

Last Name : LOCKE First Name : HEIDI Rid Number : 9437563211 Created By : Ruth.-Dorothy Web Claim Id : 1979690
 Link Begin : 01/01/2017 Link End : Activity: Employment Vendored 01/01/2017 Weekly Rate : \$166.56 Total Hours : 26
 Claimed Amount : \$125.00 Calculated Amount : \$150.00 Cost Share Amount : \$5.00 Disability Amount : \$30.00 Service Level : Full Time

Child's claim information is located in the grid at the top of the screen

Cost share displays upon launch of page

Parent's approved Activity and Start Date reflects the Monday of the billing week

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES

Division for Children, Youth and Families
Child Development Bureau

Child Care Billing

Ruth.-Dorothy

login > Provider Home > Eligible Child Claim Search > Child Claim Search - Result > Claim Entry - New Logout

Last Name : LOCKE First Name : HEIDI Rid Number : 9437563211 Created By : Ruth.-Dorothy Web Claim Id : 1979690
 Link Begin : 01/01/2017 Link End : Activity: Employment Vendored 01/01/2017 Weekly Rate : \$166.56 Total Hours : 26
 Claimed Amount : \$125.00 Calculated Amount : \$150.00 Cost Share Amount : \$5.00 Disability Amount : \$30.00 Service Level : Full Time

Claim Entry - New

	Occurs	Start Time	End Time	Billing Indicator	Hours-Minutes	NOTE
Monday 03/13/2017	1	08 : 15 AM	04 : 35 PM	P - Present	8.20	
	2	05 : 15 PM	06 : 12 PM	P - Present	0.57	
	3	* : * *	* : * *	*		
Tuesday 03/14/2017	1	08 : 00 AM	04 : 00 PM	A - Absent	8.00	
	2	* : * *	* : * *	*		
	3	* : * *	* : * *	*		
Wednesday 03/15/2017	1	08 : 00 AM	04 : 00 PM	D - Disaster	8.00	
	2	* : * *	* : * *	*		
	3	* : * *	* : * *	*		
Thursday 03/16/2017	1	* : * *	* : * *	*		
	2	* : * *	* : * *	*		
	3	* : * *	* : * *	*		

Enter AM / PM for each Start Time and End Time and select the Billing Indicator of Present or Absent or Disaster (if authorized by DHHS) for the child

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES April 25, 2017 09:55 AM
Ruth.-Dorothy

Division for Children, Youth and Families **Child Care Billing**
Child Development Bureau 

Login > Provider Home > Current Claims - Result > Claim Entry - Edit Logout

Last Name : LOCKE First Name : HEIDI Rid Number : 9437563211 Created By : Ruth.-Dorothy Web Claim Id : 1979690
 Link Begin : 01/01/2017 Link End : Activity: Employment Vendored 01/01/2017 Weekly Rate : \$166.56 Total Hours : 26
 Claimed Amount : \$125.00 Calculated Amount : \$150.00 Cost Share Amount : \$5.00 Disability Amount : \$30.00 Service Level : Full Time

Claim Entry - Edit

	Occurs	Start Time	End Time	Billing Indicator	Hours-Minutes	
Monday 03/13/2017	1	08 : 15 AM	04 : 35 PM	P - Present	8.20	
	2	05 : 15 PM	06 : 12 PM	P - Present	0.57	
	3	: * *	: * *	* *		
Tuesday 03/14/2017	1	08 : 00 AM	04 : 00 PM	A - Absent	8.00	
	2	: * *	: * *	* *		
	3	: * *	: * *	* *		
Wednesday 03/15/2017	1	08 : 00 AM	04 : 00 PM	D - Disaster	8.00	
	2	: * *	: * *	* *		
	3	: * *	: * *	* *		
Thursday 03/16/2017	1	: * *	: * *	* *		Child is not eligible
	2	: * *	: * *	* *		
	3	: * *	: * *	* *		
1	: * *	: * *	* *			

Enter each occurrence that the child attends

Enter or modify Start & End time
 Select AM / PM
 and Select Present or Absent
 Or Disaster if DHHS authorized

After entering the information for the first selected child, click the Save & Get Next Child button to go to the next child.

If the user needs to stop entering information before finishing all of the selected children, they can click the Save & Stop Entry button to save the current information and return to the claim entry at another time.

When a child is not linked for specific dates during the claim week, a message will display indicating "Child is not linked" in the **NOTE** field and the days that are outside of the begin and end dates of the link will be grayed out.

Child is not eligible will display if the child is not eligible for a specific date.

If a claim has already been submitted for a specific date and time, a message will display indicating "Date/Time already paid" in the **NOTE** field. The application will allow the user to bill for the additional occurrences on the same day.

Day	Occurrence	Start Time	End Time	Status
Monday 11/25/2013	1	08:00 AM	09:00 PM	13.00
	2	10:15 PM	11:00 PM	0.45
	3			
Tuesday 11/26/2013	1	08:00 AM	09:00 PM	13.00
	2			
	3			
Wednesday 11/27/2013	1	08:00 AM	09:00 PM	13.00
	2			
	3			
Thursday 11/28/2013	1			
	2			
	3			
Friday 11/29/2013	1			
	2			
	3			
Saturday 11/30/2013	1			
	2			
	3			
Sunday 12/01/2013	1			
	2			

“Date/Time Already Paid” will display

When there is a gap in eligibility the NOTE field will display “Child is not eligible”

When the link ends the Child is not linked message will display.

If an occurrence was omitted in error from the initial claim submission, the additional occurrences can be billed via the web.

For example:

Child’s attendance for 11-26-2013

Arrived at 8:00 A.M. and departed at 9:00 P.M. for occurrence 1

Arrived at 10:15 P.M. and departed at 11:00 P.M. for occurrence 2

Initial submitted claim did not include the second occurrence.

Functionality allows a user to go back into the web application and bill for any additional occurrences on the same day.

REMEMBER: Once the Service Level has been reached, no additional payment can be made.

Division for Children, Youth and Families
Child Development Bureau

Child Care Billing



Login > Provider Home > Eligible Child Claim Search > Child Claim Search - Result > Claim Entry - New

Logout

Last Name : LOCKE First Name : HEIDI Rid Number : 9437563211 Created By : Ruth.-Dorothy Web Claim Id : 1979690
 Link Begin : 01/01/2017 Link End : Activity: Employment Vendored 01/01/2017 Weekly Rate : \$166.56 Total Hours : 26
 Claimed Amount : \$125.00 Calculated Amount : \$150.00 Cost Share Amount : \$5.00 Disability Amount : \$30.00 Service Level : Full Time

Claim Entry - New

	Occurs	Start Time	End Time	Billing Indicator	Hours-Minutes	NOTE
Monday 03/13/2017	1	08 : 15 AM	04 : 35 PM	P - Present	8.20	
	2	05 : 15 PM	06 : 12 PM	P - Present	0.57	
	3	: : * *	: : * *	* *		
Tuesday 03/14/2017	1	08 : 00 AM	04 : 00 PM	A - Absent	8.00	
	2	: : * *	: : * *	* *		
	3	: : * *	: : * *	* *		
Wednesday 03/15/2017	1	08 : 00 AM	04 : 00 PM	D - Disaster	8.00	
	2	: : * *	: : * *	* *		
	3	: : * *	: : * *	* *		
Thursday 03/16/2017	1	: : * *	: : * *	* *		
	2	: : * *	: : * *	* *		
	3	: : * *	: : * *	* *		

Present/Absent
*
P
A
D

Q & A

QUESTION: I made a mistake and entered the time for a child, and then realized that I should not have billed for that day. The computer won't allow me to continue without making an entry. What do I do?

ANSWER: When you enter data for a specific day incorrectly, you must delete the incorrect hours (you can highlight the hours and hit the delete button or you can click in the box and hit the back space button) you MUST click on the blank space above the A in the Present/Absent column also. This will then clear the entire row.

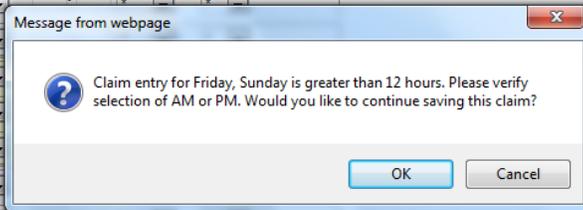
QUESTION: When can I bill for a disaster day?

ANSWER: A message will be posted on the Provider Home Page when a disaster day is authorized for payment by DHHS. To bill for a disaster day, select 'D' in the Billing Indicator field. **Please note:** IF you bill for a disaster day when you are not authorized, recoupment of incorrect payment will occur.

Tuesday 02/04/2014	1	:	:	*	:	:	*	:	*	:	:	
	2	:	:	*	:	:	*	:	*	:	:	
	3	:	:	*	:	:	*	:	*	:	:	
Wednesday 02/05/2014	1	:	:	*	:	:	*	:	*	:	:	
	2	:	:	*	:	:	*	:	*	:	:	
	3	:	:	*	:	:	*	:	*	:	:	
Thursday 02/06/2014	1	08	:	12	AM	04	:	15	PM	P		8.03
	2	:	:	*	:	:	*	:	*	:	:	
	3	:	:	*	:	:	*	:	*	:	:	
Friday 02/07/2014	1	08	:	00	AM		:					
	2	:	:	*	:	:	*	:	*	:	:	
	3	:	:	*	:	:	*	:	*	:	:	
Saturday 02/08/2014	1	:	:	*	:	:	*	:	*	:	:	
	2	:	:	*	:	:	*	:	*	:	:	
	3	:	:	*	:	:	*	:	*	:	:	
Sunday 02/09/2014	1	08	:	00	AM	11	:	00	PM	P		15.00
	2	:	:	*	:	:	*	:	*	:	:	
	3	:	:	*	:	:	*	:	*	:	:	

Actual Amount Charged for WEEK: \$ 125.00

CS01-E01



Warning Message – Claim Entry/Edit greater than 12 hours

When the total number of hours on the claim entry/edit screen exceeds 12 hours for any billing day, a warning message will display. The message will state:

“Claim entry for ‘the date’ is greater than 12 hours. Please verify the selection of AM or PM. Would you like to continue saving the claim?”

If the provider selects ‘Yes’, the claim will save. If the provider selects ‘No’, the claim will not save and the user will remain on the page. The provider then must correct the Start or End time.

Important: This warning message was created to help to prevent billing errors. This occurs when the provider indicates AM / PM by mistake. Please review the hours indicated on the claim entry/edit screen carefully to verify that the data entry is accurate.

INFORMATION: Training Clock, Absentee Usage and Authorized Disaster Days

Training:

When a parent is approved for training, any time billed “P” (present) during that week, will count as one week toward the training limit. Full weeks that are billed “A” (absent) or are not billed at all, do not count toward the training limit. When days are billed present but the weekly payment amount is zero, the week

still counts toward the limit. When a parent's activity changes mid-week, the training clock will only count a week of training, when the parent is approved for training on the last day billed during that week.

For example: If the provider bills Monday through Friday and the parent is approved for training on Monday, and the activity changes to employment during the week, that week will not be added to the training clock count. However, if the parent is approved for employment on Monday through Wednesday, and then is approved for training beginning on Thursday, one week will be added to the training clock count.

Note: The activity will change at the top of the screen to reflect the new activity once the claim is saved. This change can be viewed on the claim entry-edit screen.

Absentee Hours:

Each child eligible for child care scholarship is allowed an annual absentee allotment based on their authorized service level.

Any hours billed 'A' (Absent) will be deducted from the child's annual absentee allotment. Once the maximum hours are exhausted, no more payment for absentee hours will be paid.

Disaster Days:

Child Care Scholarship payment is allowed for an authorized Disaster day when DHHS authorizes a specific date(s) as a disaster day. A Disaster day is determined by the DHHS Child Development Bureau, the Governor or by a federal declared disaster. Providers will be notified via a web message posted either on the Logon page or the Provider Home page of the web billing application. Any unauthorized payment will be considered an improper payment and will be recouped by DHHS.

Claim Entry – New / Edit Information

1. The user will not be able to enter claims for grayed out days. Days are grayed out if:
 - Provider is not enrolled
 - Provider is not authorized for day
 - Provider is not linked to a child for that day
 - Payment has already been made
 - Absentee Allotment has been reached
 - Training Limit has been reached
 - Day is a future date
2. The user must enter the exact hour and minutes of start time and end time for each day and occurrence (occurs) that the child was in attendance.
 - An occurrence is the time a child is in care. If there is no break in time there will be just one occurrence.
 - Each child is allowed up to three occurrences per day, ex. Child arrives at 8 a.m., leaves at 10 a.m., returns at 1 p.m., leaves at 3 p.m., then returns at 5 p.m. and leaves at 9 p.m. This child would have three occurrences. The application will calculate the hours and minutes of each occurrence: the first occurrence is two hours, the second occurrence is two hours, and the third occurrence is four hours for a total of eight hours.
3. For each occurrence (occurs), the start time and end time and the AM / PM are entered by the user and the application will compute the total time in the Hours and Minutes column. Note: Do not enter military time. The application will not allow military time to be entered. The application will only save when the hours entered are between 1 and 12 and the minutes entered are between 0 and 59. Hours will not calculate in the "Hours-Minutes" column until hours and minutes are entered within these parameters.
4. The Total Hours are shown as the rounded sum of Hours and Minutes for the day. The user must enter the total amount charged for the week for this child at the bottom of the page. This amount reflects your actual charge for care provided for this child. **Note:** The **F-2 key** on the keyboard allows the user to go directly to the 'Actual Amount Charged' field without tabbing.
5. When a previously submitted claim is adjusted by DHHS, the claim must be reviewed and corrected (if necessary) by using the Claim Entry- Edit page.
6. Clicking on the **Update Rate Info** button will display the Weekly Rate, Total Hours, Claimed Amount, Calculated Amount, Cost Share Amount, Disability Amount (if applicable), and the Service Level.
7. When the **Save and Stop Entry** or **Save and Get Next Child** button is selected the entered information is validated.

If successful, the record is saved; otherwise an appropriate error message is displayed in the note section. When the records are saved, the status "saved" is reflected.

Field / Button / Link	Type	Description
Occur	Display	Displays the occurrence (day).
Start Time	Enterable	Accepts the start (arrival) time from 12:00 to 11:59. Note: When a child is in care overnight, you must enter hours for each day.
End Time	Enterable	Accepts the end (departure) time from 12:00 to 11:59.
Billing Indicator	Enterable	Requires the selection of AM / PM or 'D' for Disaster (when authorized by DHHS) from the dropdown list.
Absent / Present / Disaster	Enterable	Requires selection of Present (P), Absent (A) or Disaster (D) for the child from the dropdown list.
* (Asterisk)	Enterable	Requires the selection of the * (asterisk) from the dropdown list if information was entered and then deleted.
Hours-Minutes	Display	Displays the calculated difference in start time and end time in hours and minutes.
Note	Display	Displays the reason for the grey-out reason.
Actual Amount Charged for week	Enterable	Accepts the actual amount charged for the week. This is a mandatory numeric field that requires a decimal point. Note: This charge is the amount the provider charges the family. It is not the amount that DHHS might pay or the difference between what the provider charges and the parent pays.
Update Rate Info	Button	The user can click this button to update the rate information based on the total hours for the week. Note: This is not required to save the page.
Weekly Rate	Display	Displays the weekly rate that DHHS has determined for this child.
Total Hours	Display	Displays the total number of hours entered on this claim.
Claimed Amount	Display	Displays the amount the provider charges for this child this week.
Calculated Amount	Display	Displays the total amount DHHS has determined after subtracting the cost share from the weekly rate.
Cost Share Amount	Display	Displays the amount DHHS has determined the parent can contribute to the cost of care for this child.
Disability Amount	Display	Displays the disability amount if the child is disabled.
Service Level	Display	Displays the level of care authorized by the worker at the district office. Note: Hours claimed over the authorized service level will not be paid.
Link Begin/End Date	Display	Displays the child's link effective begin and end date (if applicable).
Activity	Display	Displays the parent's approved activity (effective the Monday ONLY of the selected billing week).
Activity Begin Date	Display	Displays the start date of the parent's approved activity.
Skip This Claim	Button	Allows the user to skip this claim and goes on to the next child in

Field / Button / Link	Type	Description
		the list.
Skip Child	Button	Allows the user to skip this child and goes on to the next child in the list.
Save & Get Next Child	Button	The user can click this button in the New screen to save the Child Entry and make a new entry for the next child. This is disabled if the user has selected only one child record. This button is displayed as Save in the Edit screen.
Save & Stop Entry	Button	The user can save the Child Entry by clicking this button.
Save	Button	The user can save the child entry by clicking this button.
Back	Button	Takes the user back to the previous page.
Home	Button	Takes the user back to the provider home page.

Claim Entry and Submission

Current Claims - Result

This process provides the user with a listing of all current claims.

Providers can enter new claims and also edit claims that have been entered and saved or have been entered, saved, submitted AND adjusted by DHHS. The DHHS adjusted claim must be reviewed and corrected (if necessary) **AND** resubmitted no later than 90 calendars of the date of service. Claims over 90 days will not be paid.

Note: If the web application “times out” after 20 minutes of inactivity, any claims that have been saved will remain. To locate those claims **Go the Provider Home page and click on Claim Entry and Submission to access these saved claims.** Do not click on Eligible Child Search to attempt to re-select the children. A message ‘No Records found’ will be display.

The claim status will either be: No Entry, Saved or Problem. The provider can delete claims and submit their current batch of claims. Providers can submit all the claims entered and saved during the week (i.e. which have a Saved status).

The saved claims are submitted after entering the valid PIN. Once the claims are processed, the application shows a Current Submitted Claim Report for submitted claims only. The report data includes child's name, child's ID, claim start and end dates, calculated total amount, and the actual amount charged.

Please note there could be a difference between the actual charged amount and calculated amount displayed on this page.

You can view ALL adjusted claims that were previously submitted AND adjusted by DHHS. You will be able to identify the adjusted claims that require review and possible correction by identifying ‘Edit’ in the Action Column and a DHHS individual's name in the Created By column. Click on ‘Edit’ and the Claim Entry – Edit screen will open. Repeat the process until all adjusted claims have been reviewed, corrected if necessary, and saved. Remember claims **MUST** be resubmitted within 90 calendar days in order for payment to be made.

How to get to this page?

- The user clicks on the **Claim Entry and Submission** link on the Provider Home page.
- The user clicks on **Save and Stop Entry** button on the Claim Entry – New page.
- The user clicks on **Save** button on the Claim Entry – Edit page.

Child Care Billing



Login > Provider Home > Current Claims - Result [Logout](#)

Provider Name: 98057 Brookridge Child Care Center **Tel. No.:** (603) 225-2522 **Resource ID:** 98057
Address: 123 GOLF COURSE Lane Concord, New Hampshire 03301- **Service:** Licensed Center

Current Claims - Result													
Select	Last Name	First Name	Rid Number	Billing Begin	Billing End	Actual Charged Amt	Cost Share	Calc Amt	Claim Status	Action	Date Saved	Web Claim ID	Created By
<input type="checkbox"/>	LOCKE	HEIDI	9437563211	03/13/2017	03/15/2017	125.00	05.00	150.00	Saved	Edit	04/25/2017	1979690	Ruth...Dorothy
<input type="checkbox"/>	RADWAN	JOSEPH	0713256798	03/13/2017	03/19/2017	00.00	00.00	00.00	No Entry	New	04/25/2017	1979691	Ruth...Dorothy

Click to select claims to submit

Enter a new claim or modify a claim by clicking the New / Edit Action link

Click on 'New' or 'Edit' to get to the Claim Entry Screen

Sort/Filter Submit Claim Delete Selection Select My Claims Select All Reset Back Home **CS02-R01**

The Department's calculation of the amount of the claim is based on current data. The allowable amount of the claim may vary based on updated information which may include, but is not limited to: changes to the maximum payment rates; changes to the eligibility of the client; changes to the cost share.

Current Claims - Result Screen

Child Care Billing



Login > Provider Home > Current Claims - Result [Logout](#)

Provider Name: 98057 Brookridge Child Care Center **Tel. No.:** (603) 225-2522 **Resource ID:** 98057
Address: 123 GOLF COURSE Lane Concord, New Hampshire 03301- **Service:** Licensed Center

Current Claims - Result													
Select	Last Name	First Name	Rid Number	Billing Begin	Billing End	Actual Charged Amt	Cost Share	Calc Amt	Claim Status	Action	Date Saved	Web Claim ID	Created By
<input type="checkbox"/>	LOCKE	HEIDI	9437563211	03/13/2017	03/15/2017	125.00	05.00	150.00	Saved	Edit	04/25/2017	1979690	Ruth...Dorothy
<input type="checkbox"/>	RADWAN	JOSEPH	0713256798	03/13/2017	03/19/2017	00.00	00.00	00.00	No Entry	New	04/25/2017	1979691	Ruth...Dorothy

- Delete a claim entry record by selecting the row to delete and clicking the Delete Selection button

Click on Submit Claim -

- Requires PIN
- Displays Claim Processing Page
- Claims with Saved Status is Submitted
- Shows Submitted Claims Report

y Claims Select All Reset Back Home **CS02-R01**

The Department's calculation of the amount of the claim is based on current data. The allowable amount of the claim may vary based on updated information which may include, but is not limited to: changes to the maximum payment rates; changes to the eligibility of the client; changes to the cost share.

Q & A

QUESTION: When the “Save and Get Next Child” button on the Claim Entry Screen is grayed out, how do I get the next child to bill for?

ANSWER: The Current Claim Result Screen maintains all the children that have been selected from the Eligible Child Search screen. Click on the Current Claims Result button on the Home Page to open the Current Claims Result page. Go to the “**Action**” Column and click on either ‘**New**’ or ‘**Edit**’. This action will bring you to the Claim Entry screen for that specific child. Enter the data and click on the **Save** button. Select the next child from the Claim Entry and Submission screen, enter the data and continue until all children have been entered.

The screenshot shows the 'Current Claims - Result' screen. On the left is a table with columns 'Last Name', 'First Name', and 'Rid Number'. The table contains five rows of data for children with the last name 'COOK'. On the right is a 'Filter By:' panel with several checkboxes and dropdown menus. A red arrow points from the 'Sort/Filter' button in the table header to the 'Filter By:' panel. Below the filter panel is a 'Sort By:' section with two dropdown menus and 'Ascending'/'Descending' radio buttons. A callout box at the bottom of the filter panel says 'Sort/Filter in a variety of ways'.

Last Name	First Name	Rid Number
COOK	CHELSEA	510066670
COOK	CHELSEA	510066670
COOK	CHELSEA	510066670
COOK	CHRISTOPHER	510066673
COOK	CHRISTOPHER	510066673

Filter By:

- Claim Status: No Entry, Problem
- LastName: COOK, COPELAND
- FirstName: CHELSEA, CHRISTOPHER
- Billing Begin: 03/29/2010, 04/05/2010
- Entry Created By: Trainee-. Nineteen
- Date Claim Last Saved: 04/15/2010

Sort By:

- Select A Column-- [Ascending] [Descending]
- Select A Column-- [Ascending] [Descending]

Sort/Filter in a variety of ways

- The provider can enter a new claim, edit a claim, delete a claim and submit the current batch of claims.
- After clicking the **New** link, the user is allowed to enter a new claim using the Current Claims – New page.
- After clicking the **Edit** link, the user is allowed to modify a claim using the Current Claims – Edit page.
- After selecting the **Delete** checkbox and clicking the **Delete Selection** button, the selected claim(s) are deleted.
- After clicking the **Submit Claims** button, the claim is sent for processing.
If successful, the PIN box will pop up for the provider. After a user correctly enters their PIN, the application generates the Current Submitted Claims List Report, which displays

the Total Number of Submitted Claims, Successful Claims and Problems, if any. (See page 45)

Sort/Filter button allows the user to sort or filter in a number of ways.

Select My Claims allows the user to only select the claims that they have created. The claims that other users have created, when there are multiple authorized users for a specific Resource ID Number, will remain on this screen.

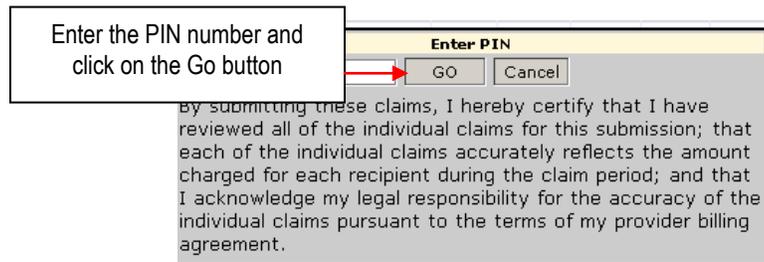
Reset clears any selections that the user indicated.

Field / Button / Link	Type	Description
Select	Button	Clicking on this box selects the children.
Last Name	Display	Displays the Last Name of the Child for whom the provider is billing.
First Name	Display	Displays the First Name of the Child for whom the provider is billing.
Child ID/RID	Display	Displays the Child ID/RID (identification/recipient identification number) for whom the provider is billing.
Billing Begin	Display	Displays the Billing Start Date.
Billing End	Display	Displays the Billing End Date.
Actual Charged Amount	Display	Displays the Actual Amount Charged amount for the week.
Cost Share	Display	Displays the Amount DHHS has determined the parent can contribute to the cost of care.
Calc. Amt.	Display	Displays the Calculated Amount for the week.
Claim Status	Display	Displays the Claim Status i.e. No Entry, Saved or Problem.
Action	Link	Either New or Edit hyperlink. <ul style="list-style-type: none"> Clicking the New link takes the user to the Claim Entry – New page. Clicking the Edit link takes the user to the Claim Entry – Edit page.
Auth. #	Display	Displays the Authorization Number of the provider.
Date Saved	Display	Displays the date on which the claim was saved.
Web Claim ID	Display	Displays the Web Claim ID number that is used by the application to track the claim.
Created By	Display	Displays the name of the individual who created the claim.
Sort/Filter	Button	This button allows the user to sort/filter in a number of ways.
Submit Claims	Button	Clicking this button submits the claim and generates the Current Submitted Claims List Report after providing the correct PIN number.

Field / Button / Link	Type	Description
Delete Selection	Button	This button deletes selected claims.
Select My Claims	Button	This button selects only the claims that the specific user has created.
Select All	Button	This button selects all claims that all users have saved.
Reset	Button	This button clears all selections.
Back	Button	This button takes the user back to the Provider Home Page.
Home	Button	This button displays the Provider Home page.
Enter PIN	Enterable	Accepts the PIN number for the user.

Submit Claims – Enter PIN

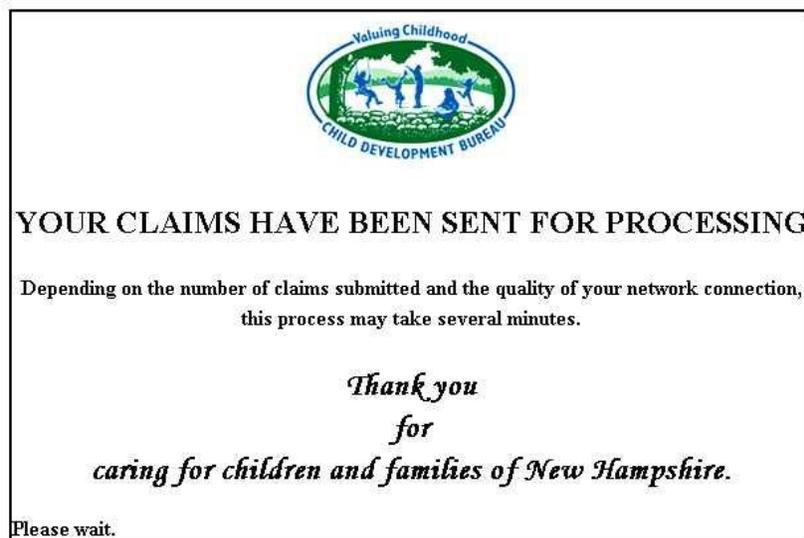
Type in the PIN number then select the Go button to submit the claim.



Submit Claims – Claim Processing Page

When the claim has been successfully submitted, this page will appear. Depending on the number of claims submitted and the quality of the user's network connection, processing time could be several minutes.

Claim Successfully Submitted Screen



Submit Claims – Current Submitted Claims List Report

Once the claim(s) is submitted from the Current Claims Result page, the provider can view the Current Submitted Claims list. This report displays the Total Submitted claims, Total Successful claims, and the Total Problem claims, if applicable. **ALL** of the claims with a **SUBMITTED** status are displayed.

Please note there could be a difference between the actual charged amount and calculated amount displayed on this page.

This report must be printed now if you want a copy for your records. Once the user leaves the Claim Submittal Report screen, the report is gone and cannot be retrieved. After the report has been printed, the user must select the Back button and is returned to the Current Claims Result screen.

NOTE: Printing this report in Landscape will allow the user to view all information. All reports will open in PDF format and can be printed and saved as a PDF.

Current Submitted Claims List Report Screen

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES
February 13, 2014 03:40 PM
Drettz.Kittenkat

Division for Children, Youth and Families
Child Development Bureau

Child Care Billing

Login > Provider Home > Current Claims - Result > Submitted Claim Current Report

Back Print Home

1 of 1 100% Find | Next

State of New Hampshire Department of Health & Human Services Date: 2/13/2014
Current Submitted Claims Report Report ID: CS02-D01-#

Total Submitted: 3 Successful: 3 Problem: 0

All Claims successfully submitted as of date: 02/13/2014

Resource ID: 93505 - BROOKRIDGE CHILD CARE CENTER Tel: 6039999999 Address: 123 GOLF COURSE Lane Concord, Hampshire 03301-
Service: Licensed Center

Last Name	First Name	Rid Number	Billing Begin	Billing End	Auth#	Total Hours Clmd	Actual Chrgd Amount	Cost Share	Calc Amount	Web Claim ID
LOCKE	HEIDI	1201647	2/10/2014	2/13/2014		33	150.00	5.00	195.00	112971
RIVERS	JERICHO	1201649	2/10/2014	2/13/2014		32	125.00	1.00	92.12	112972
RIVERS	LUMEN	1201648	2/10/2014	2/13/2014		33	110.00	10.00	100.00	112971

The Department's calculation of the amount of the claim is based on current data. The allowable amount of the claim may vary based on updated information which may include, but is not limited to: changes to the maximum payment rates; changes to the eligibility of the client; changes to the cost share.

Click on Print button to print the report

Processing Status

Current Submitted Claims List Information:

- All fields on this screen are displayed and cannot be changed
- The user can select the Print button to print the report
- The user can select the Back button to return to the Current Claims Result Screen
- The user can select the Home Button to return to the Provider Home Page

Claims History

View In-Process Information Search

To view In Process information the user must select the Resource ID Number in the drop down box and also select from the drop down box the Service for that number.

Remember if you have multiple sites, you must select each specific site to view the specific information for that site.

➤ View In-process Payment Information Report

This page allows the provider to view their payment information for each enrolled site for any claims that have been processed but are waiting to be paid. If there are no claims in process, a message “no records found” will display.

How to get to this page?

The user clicks on the **View In-Process** Information link on the Provider Home page.

In-Process Payment Information Search

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES
April 15, 2010 02:42 PM
Trainee.-Nineteen

Division for Children, Youth and Families
Child Development Bureau

Child Care Billing



[Home](#) > [Provider Home](#) > [In Process Search](#) Logout

Provider Name: EARLY CHILDHOOD CENTER **Tel. No.:** (603)311-1111 **Resource ID:** 31167
Address: 1 LICENSE Lane BEDFORD, New Hampshire 03110- **Service:** Licensed Center

In-Process Information Search

Select Provider and Service

Resource ID : **Service :**

 CS03-S0

 [NH Gov](#) [Privacy Policy](#) [Directory & Phone Numbers](#) [Help](#)

Select the specific site and service if applicable for specific report information

In-Process Payment Information Report Screen

Print Back Home Logout

1 of 1 100% Find | Next Select a format Export

State of New Hampshire **Department of Health & Human Services**

In-Process Payment Information Report

Resource ID: 31167 - EARLY CHILDHOOD CENTER **Billing Address : 1 LICENSE Lane BEDFORD, New Hampshire 03110**

Service: Licensed Center

Last Name	First Name	Rid Number	Billing Begin	Billing End
COOK	CHRISTOPHER	5100666733	01/26/2010	01/26/2010
COPELAND	GLORIA	5555555566	01/26/2010	01/26/2010
JAKES	TD	5555555588	01/26/2010	01/26/2010

Print Back Home Logout

100% Find | Next Select a format Export

Department of Health & Human Services **Date : 4/15/2010**

In-Process Payment Information Report **Report ID : CS03-D01-M/N**

HOOD CENTER **Billing Address : 1 LICENSE Lane BEDFORD, New Hampshire 03110-** **Tel. No. : (603)311-1111**

Service: Licensed Center

Last Name	Rid Number	Billing Begin	Billing End	Web Claim ID
HER	5100666733	01/26/2010	01/26/2010	591
	5555555566	01/26/2010	01/26/2010	592
	5555555588	01/26/2010	01/26/2010	593

In-Process Payment Information Report Information:

- All fields on this screen are displayed and cannot be changed
- This report is sorted by the Child's Last Name
- The provider can view their payment information for any claims processed but waiting to be paid
- The user can select the Back button to return to the previous page

NOTE: Printing this report in Landscape will allow the user to view all information. All reports will open in PDF format and can be printed and saved as a PDF.

➤ View Current Payment Search

To view Current Payment information the user must select the Resource ID Number in the drop down box and also select from the drop down box the Service for that number.

Remember if you have multiple sites, you must select each specific site to view the specific information for that site.

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES
April 15, 2010 02:45 PM
Trainee.-Nineteen

Division for Children, Youth and Families
Child Development Bureau

Child Care Billing

Home > Provider Home > Current Payment Search [Logout](#)

Provider Name: EARLY CHILDHOOD CENTER Tel. No.: (603)311-1111 Resource ID: 31167
Address: 1 LICENSE Lane BEDFORD, New Hampshire 03110- Service: Licensed Center

Current Payment Search [Go](#) [Back](#) [Home](#)

Select Provider and Service

Resource ID : Service :

[Go](#) [Back](#) [Home](#) CS03-S01

NH Gov [Privacy Policy](#) [Directory & Phone Numbers](#) [Help](#)

Select the specific site and service if applicable for specific report information

View Current Payment

This page allows the provider to view their payment information for any claims processed and in the current payment cycle. This report indicates the Total Check Amount as well as the Scheduled Mail Date.

How to get to this page?

The user clicks on the **View Current Payment** link on the Provider Home page.

Current Payment Information Report Screen

State of New Hampshire **Department of Health & Human Services** **Date : 2/14/2014**

Current Payment Information Report **Report ID : CS03-D02-MN**

Resource ID: 93505 - BROOKRIDGE CHILD CARE CENTER **Billing Address : 123 GOLF COURSE Lane** **Concord, New Hampshire 03301-** **Tel. No. : 6039999999**

Manifest#: 102450 **Manifest Date: 2/14/2014** **Total Check Amount: \$1,784.86** **Scheduled Mail Date: 2/19/2014**

Service: Licensed Center

Last Name	First Name	Rid Number	Billing Begin	Billing End	Paid Amount
LOCKE	HEIDI	125785698	02/10/2014	02/13/2014	195.00
LOCKE	HEIDI	125785698	02/03/2014	02/07/2014	170.00
LOCKE	HEIDI	125785698	01/27/2014	02/02/2014	170.00
RIVERS	JERICO	5212521228	02/10/2014	02/13/2014	92.10
RIVERS	JERICO	5212521228	02/03/2014	02/09/2014	174.00
RIVERS	JERICO	5212521228	01/27/2014	01/31/2014	92.10
RIVERS	JERICO	5212521228	01/20/2014	01/26/2014	199.00
RIVERS	JERICO	5212521228	01/13/2014	01/19/2014	204.00
RIVERS	JERICO	5212521228	01/06/2014	01/12/2014	205.50
RIVERS	LUMEN	568566585	02/10/2014	02/13/2014	100.00
RIVERS	LUMEN	568566585	02/03/2014	02/06/2014	68.10
RIVERS	LUMEN	568566585	01/27/2014	01/31/2014	115.00

Current Payment Information Report - Information:

- All fields on this screen are displayed and cannot be changed
- This report is sorted on the Child's Last Name
- This page allows the provider to view their payment information for any claims that have been processed and are in the current payment cycle
- The user can select the Back button to return to the previous page

NOTE: Printing this report in Landscape will allow the user to view all information. All reports will open in PDF format and can be printed and saved as a PDF.

➤ View Last Five (5) Payments Search

To view Last Five Payment information the user must select the Resource ID Number in the drop down box and also select from the drop down box the Service for that number.

Remember if you have multiple sites, you must select each specific site to view the specific information for that site.

The screenshot shows the 'Child Care Billing' interface for the 'NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES'. The page title is 'Child Care Billing' and the user is identified as 'Trainee - Nineteen'. The breadcrumb trail is 'Home > Provider Home > Last Five Payment Search'. The provider information is: 'Provider Name: EARLY CHILDHOOD CENTER', 'Tel. No.: (603)311-1111', 'Address: 1 LICENSE Lane BEDFORD, New Hampshire 03110-', 'Resource ID: 31167', and 'Service: Licensed Center'. The 'Last (5) Payments Search' section has 'Go', 'Back', and 'Home' buttons. Below this is the 'Select Provider and Service' section with two dropdown menus: 'Resource ID : 31167 EARLY CHILDHOOD CENTER' and 'Service : Licensed Center'. Red arrows point to the dropdown arrows of both menus. At the bottom of the form are 'Go', 'Back', and 'Home' buttons, and the text 'CS03-S01'.

Select the specific site and service if applicable for specific report information

View Last Five (5) Payments

The provider can view their last five (5) most recent payments in the preceding six (6) months.

How to get to this page?

The user clicks on the **View Last Five (5) Payments** link on the Provider Home page.

To View Last Five (5) Payment Report Information:

- All fields on this screen are displayed but cannot be changed
- The provider can view their last five (5) most recent payments in the preceding six (6) months
- The user can select the Back button to return to the previous page

NOTE: Printing this report in Landscape will allow the user to view all information. All reports will open in PDF format and can be printed and saved as a PDF.

Last Five (5) Payment Report Screen

Billing Address : 1 LICENSE Lane BEDFORD, New Hampshire 03110-				
Payment: 1-Manifest#: 100018		Manifest Date: 01/25/2010		
Last Name	First Name	Rid Number	Billing Begin	Billin
COOK	CHELSEA	273007	01/11/2010	01/15
COOK	CHRISTOPHER	273009	01/11/2010	01/14
COPELAND	GLORIA	273163	01/11/2010	01/14
JAKES	TD	273155	01/11/2010	01/14
PARSLEY	ROD	273157	01/11/2010	01/15
Payment: 2-Manifest#: 100017		Manifest Date: 01/25/2010		
Service: Licensed Center				
Last Name	First Name	Rid Number	Billing Begin	Billin
COOK	CHELSEA	273007	01/18/2010	01/22
COOK	CHELSEA	273007	07/20/2009	07/24
COOK	CHRISTOPHER	273009	01/18/2010	01/22
COOK	CHRISTOPHER	273009	07/20/2009	07/24
COPELAND	GLORIA	273163	01/18/2010	01/22

Department of Health & Human Services					Date : 4/15/2010
<u>Last Five(5) Payment Report</u>					Report ID : CS03-D03-MN
DD CENTER					Tel. No. : (603)311-1111
RD, New Hampshire 03110-					
Manifest Date: 01/25/2010			Total Check Amount: \$410.72		
Service: Licensed Center					
Name	Rid Number	Billing Begin	Billing End	Paid Amount	
	273007	01/11/2010	01/15/2010	30.00	
	273009	01/11/2010	01/14/2010	115.00	
	273163	01/11/2010	01/14/2010	125.00	
	273155	01/11/2010	01/14/2010	100.00	
	273157	01/11/2010	01/15/2010	40.72	
Manifest Date: 01/25/2010			Total Check Amount: \$1,608.92		
Service: Licensed Center					
Name	Rid Number	Billing Begin	Billing End	Paid Amount	

➤ Remittance Advice

To view Remittance Advice information the user must select the Resource ID Number in the drop down box and also select from the drop down box the Service for that number.

Remember if you have multiple sites, you must select each specific site to view the specific information for that site.

The provider can view their Remittance Advice for the last eighteen (18) months of payment.

How to get to this page?

The user clicks on the **Remittance Advice** link on the Provider Home page.

To View Remittance Advice Information:

- All fields on this screen are displayed but cannot be changed
- The provider can view the most recent Remittance Advice by clicking in the box “Retrieve Latest Only”
- The provider can view the last eighteen months (18) by clicking on the Manifest Number
- The user can select the Back button to return to the previous page

The cost share is the amount that the Department has determined that the family can contribute to the cost of care. The cost share has already been deducted from the Weekly Standard Rate or the provider’s charge whichever is less. The total cost share amount is indicated per child per week.

NOTE: Printing this report in Landscape will allow the user to view all information. All reports will open in PDF format and can be printed and saved as a PDF.

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES
April 19, 2011 12:21 PM
Sue.A.Pine

Division for Children, Youth and Families
Child Development Bureau

Child Care Billing

Home > Provider Home > Remittance Advice Search [Logout](#)

Provider Name: New Beginnings Tel. No.: Resource ID: 85251
Address: 123 MAIN Street Concord, New Hampshire 03301- Service: Licensed Center

Search Back Home

Provider: 85251 New Beginnings Retrieve Latest Only

From Date: To Date:

Please enter additional criteria to narrow the search. Otherwise, the search may take several minutes to complete.

Search Back Home CS04-501

Enter a date range

Click to retrieve only the latest Remittance Advice (RA)

➤ Remittance Advice (RA) Search

The user may use the Retrieve Latest Only option on the Remittance Advice Search criteria. By selecting this option the user will receive the latest Remittance Advice only.

Providers can search for and view any Remittance Advice issued within the last 18 months. Users have the ability to select begin and end dates for the Remittance Advice search to request a specific timeframe by using the calendar or entering a date. If no date is selected the application will take additional time to retrieve the data and will present results for all RAs issued in the last 18 months.

Users are encouraged to enter a date range to narrow the search; otherwise the application may take additional time to display.

The screenshot shows the 'Remittance Advice Search' page for provider 93505 BROOKRIDGE CHILD CARE CENTER. The page includes a header with 'Login > Provider Home > Remittance Advice Search' and a 'Logout' button. Below the header, provider information is displayed: 'Provider Name: 93505 BROOKRIDGE CHILD CARE CENTER', 'Tel. No.: (603) 999-9999', 'Resource ID: 93505', 'Address: 123 GOLF COURSE Lane Concord, New Hampshire 03301-', and 'Service: Licensed Center'. A search bar contains the provider name, and a table shows a result with Manifest Number 102450 and Date 02/14/2014. The search criteria section includes a 'Retrieve Latest Only' checkbox, 'From Date' and 'To Date' fields with calendar icons, and a text input field for additional criteria. Two red arrows point from the 'Retrieve Latest Only' checkbox and the 'Manifest Number' 102450 to two boxes below: 'Retrieve Latest RA' and 'Select specific RA'. The footer contains 'NH Gov', 'Privacy Policy', 'Directory & Phone Numbers', and 'Help'.

If a date range is specified OR if no dates are indicated the application will display each Remittance Advice. The user must click on the Manifest Number to display the specific Remittance Advice. There may be multiple pages of RAs, which will be indicated by the scroll bar on the side of the page.

Page 1 of 2

User can also use the scroll bar

Back Print Home

1 of 2 100% Find | Next

STATE OF NEW HAMPSHIRE Manifest Date: 02/14/2014
Division of Family Assistance
Remittance Advice

Manifest #: 102450
Resource ID: 93505
Claims Payment Voice Response #: 1-888-294-4353

Transaction Total Amount: \$1,784.86
Balance due State prior to Payment: 0.00
New Balance due State: 0.00
Net Check Amount: \$1,784.86

BROOKRIDGE CHILD CARE CENTER
123 GOLF COURSE Lane
Concord New Hampshire 03301-

Recipient Name Service Type	Recipient Id Record Type Auth Nbr	Dates of Service TCN Nbr	Paid Amt	Status	*Cost Share Status Dt
LOCKE HEIDI Licensed Center	1201647 M	01/27/2014-02/02/2014	\$170.00	Paid	02/14/2014 \$5.00
LOCKE HEIDI Licensed Center	1201647 M	02/03/2014-02/07/2014	\$170.00	Paid	02/14/2014 \$5.00
LOCKE HEIDI	1201647	02/10/2014-02/13/2014	\$195.00	Paid	\$5.00

Login > Provider Home > Remittance Advice Search > Remittance Advice Logout

Back Print Home

2 of 2 100% Find | Next

Recipient Name Service Type	Recipient Id Record Type Auth Nbr	Dates of Service TCN Nbr	Paid Amt	Status	*Cost Share Status Dt
RIVERS LUMEN Licensed Center	1201648 M	02/03/2014-02/06/2014	\$68.12	Paid	02/14/2014 \$10.00
RIVERS LUMEN Licensed Center	1201648 M	02/10/2014-02/13/2014	\$100.00	Paid	02/13/2014 \$10.00

* The Cost Share amount has already been deducted from your payment.

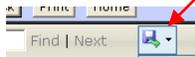
If you have chosen to receive payment electronically (EFT), it is your responsibility to verify that the amount indicated on this Remittance Advice has been deposited into your bank account. This Remittance Advice does not guarantee that the money has been deposited.

Page 2 of 2 05/05/1999 HCWR72A

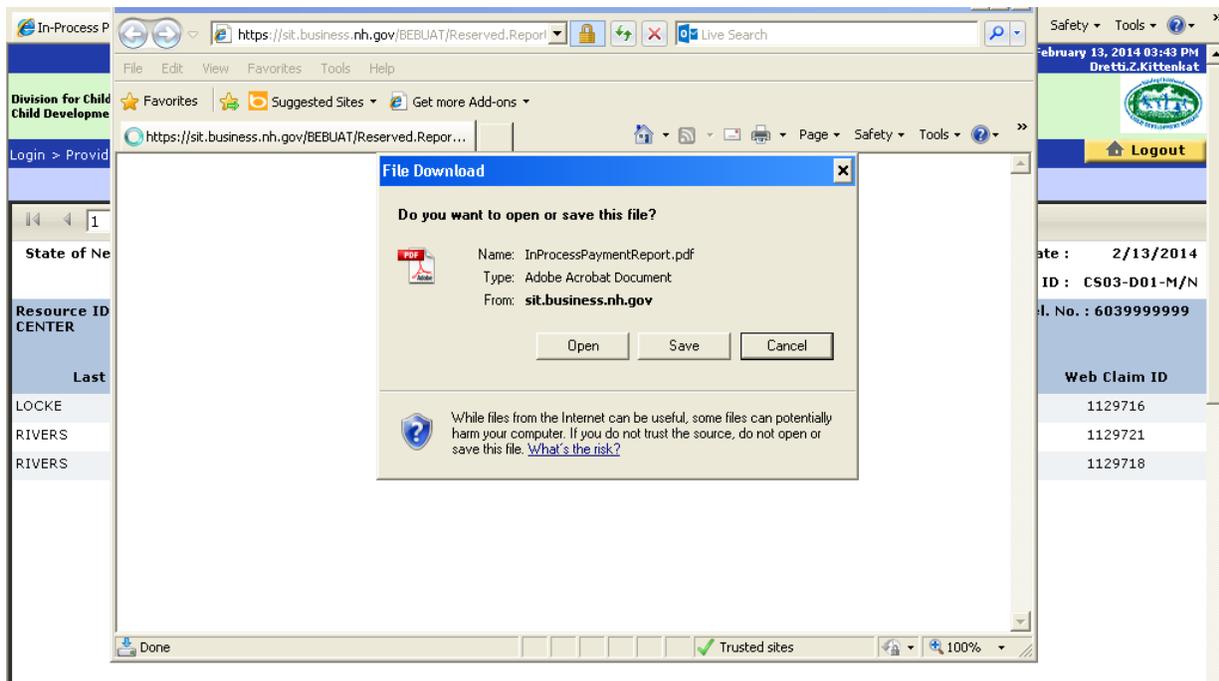
Reports

All reports will open in PDF format and can be printed and saved as a PDF.

Click on the Print icon on the report.



Reports will automatically launch in Adobe Acrobat. A message will display asking the user if they want to open, save or cancel. If Open is selected the report will open in PDF format. If the Save is selected the user can save the report as a PDF.



NOTE: Printing this report in Landscape will allow the user to view all information. All reports will open in PDF format and can be printed and saved as a PDF.

Field / Button / Link	Type	Description
Resource ID	Drop Down	Allows selection of the specific site from drop down list.
Service	Drop Down	Allows selection of the specific site from drop down list.
Child Name	Dropdown	Allows selection of the Child's Name from the drop down list.
Child ID/RID	Enterable	Allows the Child's ID (identification/recipient identification number) to be entered.
From Date	Enterable	Accepts the start date of the report in mm/dd/yyyy format.
To Date	Enterable	Accepts the end date of the report in mm/dd/yyyy format.
Calendar From	Enterable	Click on the From Date calendar, click on the specific date. Click the "X" box to clear the selection.
Calendar To	Enterable	Click on the To Date calendar, click on the specific date. Click the "X" box to clear the selection.
Go	Button	Generates a report based on the criteria entered.
Back	Button	Takes the user back to the previous page.
Home	Button	Takes the user to the Provider Home page.

Submitted Claims Report – View

This report allows the provider to view and print a Summarized Payment Report for the billing period specified in the search criteria. This report is best-printed landscape.

How to get to this page?

The provider enters search information and selects the **Go** button on the Submitted Claim Report Search page.

Submitted Claims Report Result Screen

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES April 25, 2017 10:22 AM
Ruth.-Dorothy

Division for Children, Youth and Families **Child Care Billing**

Child Development Bureau

Login > Provider Home > Submitted Claim Search > Submitted Claim Results Logout

Back Print Home

1 of 1 100% Find | Next

State of New Hampshire Department of Health & Human Services Date : 4/25/2017
Submitted Claims Report Report ID : CS02-D01-M

Resource ID: 98057 - Brookridge Child Care Center
Address: 123 GOLF COURSE Lane Concord, New Hampshire 03301- Tel: 6032252522

Service: Licensed Center

Last Name	First Name	Rid Number	Billing Begin	Billing End	Auth#	Total Hours Clmd	Actual Chrgd Amount	Cost Share	Calc Amount	Date Submitted	File Date	Web Claim ID	Detail
LOCKE	HEIDI	9437563211	03/13/2017	03/15/2017		26	125.00	5.00	150.00	04/25/2017		1979690	Detail
RADWAN	JOSEPH	0713256798	03/13/2017	03/16/2017		34	135.50	10.00	125.50	04/25/2017		1979691	Detail

The Department's calculation of the amount of the claim is based on current data. The allowable amount of the claim may vary based on updated information which may include, but is not limited to: changes to the maximum payment rates; changes to the eligibility of the client; changes to the cost share.

Click on the detail link to view and print detailed payment report for a selected child for the billing period. All days billed will display.

Submitted Claims Detail Report

April 25, 2017 10:23 AM
Ruth.-Dorothy
NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES

Division for Children, Youth and Families
Child Development Bureau

Child Care Billing

Login > Provider Home > Submitted Claim Search > Submitted Claim Results
Logout

1 of 1
100%
Find | Next

State of New Hampshire	Department of Health & Human Services	Date : 4/25/2017
	<u>Submitted Claims Detail Report</u>	Report ID : RP01-D02-M
Resource ID : 98057	Provider Name : Brookridge Child Care Center	

Billing Begin	Billing End	Actual Amount Charged	Disability Amount	Weekly Hours
03/13/2017	03/15/2017	\$125.00	\$30.00	26

Billing Date	Start Time	End Time	Billing Indicator	Claim Hours
3/13/2017	8:15 AM	4:35 PM	P	09:17
	5:15 PM	6:12 PM	P	
3/14/2017	00:00 AM	00:00 AM	P	08:00
	8:00 AM	4:00 PM	A	
	00:00 AM	00:00 AM	P	
3/15/2017	8:00 AM	4:00 PM	D	08:00
	00:00 AM	00:00 AM	P	
	00:00 AM	00:00 AM	P	

Submitted Claims Report – View Information:

- All fields on this screen are displayed and cannot be changed. All days billed will display on the Detail report.
- Records are sorted by the Last Name and then the First Name
- The user can select the Back button to return to the previous page
- The user can select the Print button to print the report

Note: All reports will open in PDF format and can printed and saved as a PDF.

➤ Summarized Payment Report

Summarized Payment Report - Search

This page allows the provider to search for a Summarized Payment report for a specific child or all children and billing period or adjudication period. Adjudication means that the claim has been received and processed for payment.

A provider can view and print this report for multiple sites, a specific child or all children for a particular billing period with this search.

To view Submitted Claims information the user must select the Resource ID Number in the drop down box and also select from the drop down box the Service for that number.

Remember if you have multiple sites, you must select each specific site to view the specific information for that site.

How to get to this page?

The user clicks on the Summarized Payment Report link on the Provider Home page.

Summarized Payment Search Screen

The screenshot shows the Summarized Payment Search Screen with the following fields and annotations:

- Resource ID :** 31167 EARLY CHILDHOOD CENTER (dropdown menu)
- Service :** Licensed Center (dropdown menu)
- Select Child and/or Select Period** section:
 - Child Name :** -- All Children -- (dropdown menu with options: COOK, CHELSEA; COOK, CHRISTOPHER; COPELAND, GLORIA)
 - OR**
 - Child Id :** (text input field)
- By Billing Period** (radio button, selected) and **By Adjudication Period** (radio button)
- From Date :** (text input field with calendar icon and X button)
- To Date :** (text input field with calendar icon and X button)
- Calendar:** A calendar for April 2010 is displayed, showing dates from 28 to 30. A red arrow points to the date 30, and a callout box says "Click the X box to access the calendar. Click on the specific Monday date".

Annotations include:

- A box labeled "Select by Billing Period" with an arrow pointing to the "By Billing Period" radio button.
- A box labeled "To generate the report:" with a list:
 - Enter Search Criteria
 - Select Go Button
- A callout box pointing to the "X" button on the calendar: "Click the X box to access the calendar. Click on the specific Monday date".

Summarized Payment Report - Search Information:

- The provider can search the Summarized Payments for a specific child or all children for the specified week.
- If billing dates are not specified, the last 18 months of history is shown.
- If the user does not select any specific information, a general search is conducted, and will display all claims for all children, for all billing periods. If this is done it will take much longer to retrieve the information.

To select a specific date period, click on the calendar and select the correct dates. Dates can also be manually entered.

NOTE: Printing this report in Landscape will allow the user to view all information. All reports will open in PDF format and can be printed and saved as a PDF.

Field / Button / Link	Type	Description
Resource ID	Dropdown	Allows selection of the specific site from the drop down list.
Service	Dropdown	Allows selection of the specific site from the drop down list.
Child Name	Dropdown	Allows selection of the child's name from the drop down list.
Child ID/RID	Enterable	Accepts the Child ID/RID number (identification/recipient identification number).
By Billing Period / By Adjudication Period	Option Button	Allows selection of report generation on the basis of By Billing Period or By Adjudication Period.
From Date	Enterable	Accepts the start date of the Billing Period or Adjudication Period in mm/dd/yyyy format.
To Date	Enterable	Accepts the end date of the Billing Period or Adjudication Period in mm/dd/yyyy format.
Calendar From	Enterable	Click on the From Date calendar, click on the specific date. Click the "X" box to clear the selection.
Calendar To	Enterable	Click on the To Date calendar, click on the specific date. Click the "X" box to clear the selection.
Go	Button	Generates a report based on the criteria entered.
Back	Button	Takes the user back to the previous page.
Home	Button	Takes the user back to the Provider Home page.

Summarized Payment Report - View

This report allows the provider to view and print a Summarized Payment Report for a billing or adjudication period.

How to get to this page?

The provider enters search information and selects the Go button on the Summarized Payment Report Search page.

Summarized Payment Report Result Screen

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES April 25, 2017 10:30 AM
Ruth.-Dorothy

Division for Children, Youth and Families
Child Development Bureau **Child Care Billing**

login > Provider Home > Summarized Payment Search > **Summarized Payment Results** Logout

Back Print Home

1 of 1 100% Find | Next

State of New Hampshire Department of Health & Human Services Date : 4/25/2017
Summarized Payment Report Report ID : RP02-D01-M

Resource ID : 98057 Brookridge Child Care Center
Billing Address : 123 GOLF COURSE Lane Concord, New Hampshire 03301- Tel. No. : 6032252522
Service : Licensed Center

Last Name	First Name	Billing Begin	Billing End	Total Paid Amount	Adjudication Date	Manifest Number	Manifest Date	Detail
LOCKE	HEIDI	3/13/2017	3/15/2017	150.00	04/25/2017	102764	04/25/2017	Detail
RADWAN	JOSEPH	3/13/2017	3/16/2017	125.50	04/25/2017	102764	04/25/2017	Detail
Total Amount :				275.50				

Click on the detail link to view and print detailed payment report for a selected child for the billing period.

Summarized Detail Report

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES
April 25, 2017 10:31 AM
Ruth.-Dorothy

Division for Children, Youth and Families
Child Development Bureau
Child Care Billing

Login > Provider Home > Summarized Payment Search > **Summarized Payment Results**
Logout

Back Print Home

1 of 1 100% Find | Next

State of New Hampshire		Department of Health & Human Services			Date : 4/25/2017		
Resource ID : 98057		<u>Summarized Payment Detail Report</u>			Report ID : RP02-D01-M-Detail		
Child Name : HEIDI LOCKE				Rid Number : 9437563211			
Billing Begin	Billing End	Total Paid Amount	Adjudication Date	Manifest Number	Manifest Date	Weekly Hours	Disability Amount
03/13/2017	03/15/2017	\$150.00	04/25/2017	102764	04/25/2017	26	\$30.00
Billing Date		Start Time		End Time		Billing Indicator	Hours Billed
		8:15 AM		4:35 PM		P	
3/13/2017		5:15 PM		6:12 PM		P	9:17
		00:00 AM		00:00 AM		P	
3/14/2017		8:00 AM		4:00 PM		A	
		00:00 AM		00:00 AM		P	8:00
		00:00 AM		00:00 AM		P	
3/15/2017		8:00 AM		4:00 PM		D	
		00:00 AM		00:00 AM		P	8:00
		00:00 AM		00:00 AM		P	

Summarized Payment Report - View Information:

- All fields on this screen are displayed and cannot be changed.
- The provider can view the Summarized Payments for one child or all children for the specified week.
- If billing dates are not specified, the last 18 months of history is shown.
- The report displays detail information of claims paid.
 - ◇ The child's information appears at the top of the screen. The information includes: Child's Name, RID Number, Billing From and To Date, Billing Begin and End Date, Total Paid Amount, Adjudication Date, Manifest Number, Manifest Date, Weekly Hours and Disability Amount if applicable.
 - ◇ The start time, end time, present/absence, hours billed
 - ◇ This report is sorted by Billing Date.
- The user can select the Print button to print the report.
- The user can select the Back button to return to the previous page.

➤ Absentee Usage Report

Absentee Usage Report - Search

This report allows the provider to search for the number of absentee hours used for a specific child or all children. This report reflects the current calendar year and the previous calendar year.

All children will be listed on this report. The number of absentee hours indicated is the number of absentee hours paid for the child. If the number of hours is zero, it means that no absentee hours have been used for the child. Once the maximum annual absentee hours have been used, no more absentee days can be paid and the parent is responsible for payment. This report is accurate as of the date and time being viewed. It is subject to change as information is updated.

A provider can view and print this report for multiple sites, a specific child or all children for a particular billing period with this search.

To view Absentee information the user must select the Resource ID Number in the drop down box and also select from the drop down box the Service for that number.

Remember if you have multiple sites, you must select each specific site to view the specific information for that site.

How to get to this page?

The user selects the **Absentee Usage Report** link on the Provider Home page.

Absentee Usage Report Search Screen

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES
April 27, 2017 08:26 AM
Ruth...Dorothy

Division for Children, Youth and Families
Child Development Bureau
Child Care Billing

Login > Provider Home > Absentee Usage Search Logout

Provider Name: 98057 Brookridge Child Care Center Tel. No.: (603) 225-2522
Address: 123 GOLF COURSE Lane Concord, New Hampshire 03301- Go Back Home

Select Provider
Resource ID: 98057 Brookridge Child Care Center

Select Child
Child Name: -- All Children
LOCKE, HEIDI
RADWAN, JOSEPH
OR Child ID:

Year: 2017

Select Current Year or Previous Year

To generate the report:
• Enter Search Criteria
• Select Go Button

Go Back Home

NH Gov Privacy Policy Directory & Phone Numbers Help

Absentee Usage Report – Search Information:

- The provider can specify the search parameters for this report, either by a specific child or by all children.
- If the user does not select any specific information, a general search is conducted, and will display all claims for all children, for all billing periods. If this is done it will take much longer to retrieve the information.

NOTE: Printing this report in Landscape will allow the user to view all information. All reports will open in PDF format and can be printed and saved as a PDF.

Field/Button Link	Type	Description
Resource ID	Drop Down	Allows selection of the specific Resource ID number (identification number) for the specific site.
Child Name	Combo box	Allows selection of the child name from the drop down list. The user can also select all children option.
Child ID/RID	Enterable	Accepts the Child ID/RID (identification/recipient identification number).
Year	Enterable	Allows selection of current year or previous year.
Go	Button	Generates a report based on the criteria entered.
Back	Button	Takes the user back to the previous page.
Home	Button	Takes the user back to the Provider Home page.

Absentee Usage Report – View

Providers can view and print an **Absentee Usage** report by the current or previous year from this page, listing all eligible children.

This report shows the names of all children and the number of days used for absentee. This number reflects all hours paid for all providers.

The Absentee Usage Report lists children who are linked to the provider. The report indicates the number of hours that have been paid, including hours that may have been paid when the child was linked to a different provider.

Linked children will remain on this report until the next calendar year. Providers will see the “hours used” count decrease to zero on January 1st if the child is still eligible and linked.

Children whose link ends will remain on this report for 90 days from the date the link ended.

Payments for child care will no longer be made when the child exceeds the maximum annual absentee allotment.

Note: There is a possibility that the number of hours used could change if the child is cared for by more than one provider.

How to get to this page?

When the provider enters search criteria and clicks the **Go** button on the Job Search Limit Search page.

Absentee Usage Report Result Screen

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES
April 25, 2017 10:29 AM
Ruth.,Dorothy

Division for Children, Youth and Families
Child Development Bureau

Child Care Billing

login > Provider Home > Absentee Usage Search > Absentee Usage Results [Logout](#)

Back Print Home

1 of 1 100% Find | Next

State of New Hampshire Department of Health & Human Services Date: 4/25/2017

Absentee Usage Report

Year: 2017

Last Name	First Name	Rid Number	Absentee Hours Used
LOCKE	HEIDI	9437563211	8
RADWAN	JOSEPH	0713256798	0

Hey there....The absentee usage report is an indicator of the number of absentee hours used in the selected calendar year. The numbers in the report are subject to change as claims are processed. This report does not establish eligibility for payment as of a particular date or time.

Indicates the Year selected

Absentee Usage Report - View Information:

- All fields on this screen are displayed and cannot be changed
- This report displays a list of all eligible and linked children's names
- This report is only effective as of this moment in time and can change at any time as claims are paid to any provider
- The user can select the Print button to print the report. This report is best-printed landscape.
- The user can select the Back button to return to the previous page
- The user can select the Back button to return to the previous page.

➤ Training Limit Report

Training Limit Report - Search

This report allows the provider to search for the number of Training weeks used for child care for a specific child or all children.

A child listed on this report does not mean that the child care is currently approved for training. It simply reflects that the payment was made on behalf of this child due to a parent/guardian's training activity. This report is accurate as of the date and time being viewed. It is subject to change as information is updated.

A provider can view and print this report for multiple sites, a specific child or all children for a particular billing period with this search.

To view Training information the user must select the Resource ID Number in the drop down box and also select from the drop down box the Service for that number.

Remember if you have multiple sites, you must select each specific site to view the specific information for that site.

How to get to this page?

The user selects the Training Limit Report link on the Provider Home page.

Training Limit Report Search Screen

search

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES February 19, 2014 01:44 PM Eileen.Z.Mullen

Division for Children, Youth and Families Child Development Bureau **Child Care Billing**

Login > Provider Home > Training Limit Search Logout

Provider Name: 93505 BROOKRIDGE CHILD CARE CENTER Tel. No.: (603) 999-9999 Resource ID: 93505
Address: 123 GOLF COURSE Lane Concord, New Hampshire 03301- Service: Licensed Center

Go Back Home

Select Provider

Resource ID: 93505 BROOKRIDGE CHILD CARE CE

Select Child

Child Name: -- All Children -- JOY, CHARITY LOCKE, HEIDI MCGREGOR, SLAYDEN

OR Child ID: []

To generate the report:

- Enter Search Criteria
- Select Go Button

Go Back Home

NH Gov Privacy Policy Directory & Phone Numbers Help

Training Limit Report – Search Information:

- The provider can specify the search parameters for this report, either by a specific child or by all children.

- If the user does not select any specific information, a general search is conducted, and will display all claims for all children, for all billing periods. If this is done it will take much longer to retrieve the information.

NOTE: Printing this report in Landscape will allow the user to view all information. All reports will open in PDF format and can be printed and saved as a PDF.

Field/Button Link	Type	Description
Resource ID	Drop Down	Allows selection of the specific Resource ID number (identification number) for the specific site.
Child Name	Combo box	Allows selection of the child name from the drop down list. The user can also select all children option.
Child ID/RID	Enterable	Accepts the Child ID/RID (identification/recipient identification number).
Go	Button	Generates a report based on the criteria entered.
Back	Button	Takes the user back to the previous page.
Home	Button	Takes the user back to the Provider Home page.

Training Limit Report - View

Providers can view and print a Training Limit report from this page, listing all eligible children whose parent is approaching the one-hundred four- week (104) lifetime limit of child care payments made for the activity of training/education.

This report shows the names of all children and the number of weeks used for training/education. The number reflects all weeks paid for all providers for this lifetime limit. The report identifies the weeks used at two levels:

- **Yellow** highlight (!) indicates the parent has used between 84 and 99 weeks
- **Red** highlight (!!) indicates the parent has used between 100 and 104 weeks

Payments for child care will no longer be made when the parent exceeds 104 weeks of child care for the activity of training/education. However, payments may continue to be made when the parent is participating in another approved activity.

The report lists children who are linked to the provider and have had child care paid for training and the total number of weeks that have been paid, including weeks that may have been paid when the child was linked to a different provider.

Note that any time billed during one-day counts as 1 week. Example: One hour will count as one week.

Linked children will remain on this report for 6 months after the training activity ends.

Children whose link ends will remain on this report for 90 days from the date the link ended.

A child listed on this report does not mean that child care is currently approved for training. It simply reflects that payment has been made on behalf of this child due to a parent/guardian's training activity. This report is accurate as of the date and time being viewed. It is subject to change as information is updated.

A provider who has multiple sites can choose each site from the Provider Home page to view and print this report. To view training information the user must select the Resource ID Number in the "Provider" drop down box and also select the Service type from the "Service" drop down box for that number.

Note: There is a possibility that the number of days used could change if the child is cared for by more than one provider.

How to get to this page?

When the provider enters search criteria and clicks the Go button on the Training Limit Search page.

Training Limit Report Result Screen

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES February 19, 2014 01:51 PM Eileen.Z.Mullen

Division for Children, Youth and Families
Child Development Bureau

Child Care Billing

Login > Provider Home > Training Limit Search > Training Limit Results Logout

Back Print Home

1 of 1 100% Find | Next

State of New Hampshire Department of Health & Human Services Date : 2/19/2014
Training Limit Report Report ID : RP04-D02

Ind	Last Name	First Name	Rid	Training Weeks Used
	RIVERS	LUMEN	568566585	1

Highlight indicator ! or !!

69 / Page

Training Limit Report - View Information:

- All fields on this screen are displayed and cannot be changed
- This report displays a list of all children's names whose parent/guardian are approaching the 104 week training limit
- This report is only effective as of this moment in time and can change at any time as claims are paid to any provider
- A child will not appear on this report until at least one day is paid
- The user can select the Print button to print the report. This report is best-printed landscape.

Note: The yellow highlighted training limit rows will always begin with '!'. The red highlighted training limit rows will always begin with '!!' so that when these reports are printed on a black and white printer the provider will be able to identify each training limit for each child.

- The user can select the Back button to return to the previous page

Groups

➤ Create/Maintain Group

Providers can create and maintain specific groups of children to allow billing by the specific group. Providers can create groups that can be defined to meet the business need. For example: Create name of group based on classroom name; Ex: Butterflies or create name based on the age group: Ex: 0-2 etc. Providers can change specific group information as needed, such as changing the name of an existing group or changing the description of an existing group.

Create a New Group

The create group function allows providers to create a new group.

How to get to this page?

When the provider clicks on Create/Maintain Group the Group List page will appear.

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES April 25, 2017 09:41 AM
Ruth.-Dorothy

Division for Children, Youth and Families
Child Development Bureau

Child Care Billing

login > [Provider Home](#) [Logout](#)

Provider : 98057 Brookridge Child Care Center **Service :** Licensed Center

Provider Name: 98057 Brookridge Child Care Center **Tel. No.:** (603) 225-2522 **Resource ID:** 98057
Address: 123 GOLF COURSE Lane Concord, New Hampshire 03301- **Service:** Licensed Center

Eligible Child Claim Search

Claim History

- ▣ View In-Process Information
- ▣ View Current Payment
- ▣ View Last (5) Payments
- ▣ Remittance Advice

- ▣ Change Password
- ▣ Forgot PIN
- ▣ Change PIN

Claim Entry and Submission

Reports

- ▣ Submitted Claims Report
- ▣ Summarized Payment Report
- ▣ Training Limit Report
- ▣ Absentee Usage Report

- ▣ Create / Maintain Group
- ▣ Manage Groups

Click on "Create/Maintain Group".

PRV-HME

The "Group - List" page screen

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES February 20, 2014 08:02 AM
Margaret Z. Julian

Division for Children, Youth and Families
Child Development Bureau

Child Care Billing

login > [Provider Home](#) > [Group List](#) [Logout](#)

No record(s) found.

Provider Name: 93506 PALM TREE CHILD CARE **Tel. No.:** (603) 999-9999 **Resource ID:** 93506
Address: 256 RIALTO Avenue Concord, New Hampshire 03301- **Service:** License Family Home

Group - List New Back Home

New Back Home GR01-R01

Help

Click on the "New" button.

The "Group-New" page

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES February 20, 2014 08:03 AM
Margaret Z. Julian

Division for Children, Youth and Families
Child Development Bureau

Child Care Billing

Login > Provider Home > Maintain Group Logout

Provider Name: 93506 PALM TREE CHILD CARE **Tel. No.:** (603) 999-9999 **Resource ID:** 93506
Address: 256 RIALTO Avenue Concord, New Hampshire 03301- **Service:** License Family Home

Group - New Submit Clear Back Home

***Group Name**

Group Description :

Submit Clear Back Home

[Home](#) & Phone Numbers [Help](#)

Type in the name of the group.
For example: Butterflies

Click in the "Group
Name" box.

Click the "Submit" button.

Click in the "Group Description" box.
Type in the description of the group.
For example: Infants

It is important to note that the Group Name will be alphabetized by 'case' i.e. capital verses lower case letter. Therefore if you begin four-group names with a "B", "b", "R", "F", the alphabetical listing of the groups will be "B", "F", "R", and "b". To be consistent and to keep the groups in true alpha order, you may want to enter all groups with the first letter capitalized **OR** all lower case letters for all groups.

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES February 20, 2014 08:03 AM
Margaret.Z.Julian

Division for Children, Youth and Families
Child Development Bureau

Child Care Billing

Login > Provider Home > Maintain Group Logout

Provider Name: 93506 PALM TREE CHILD CARE Tel. No.: (603) 999-9999 Resource ID: 93506
Address: 256 RIALTO Avenue Concord, New Hampshire 03301- Service: License Family Home

Group - New Submit Clear Back Home

*Required Fields

*Group Name : Butterflies
Group Description : Infants

Submit Clear Back Home GR01-NE01

NH Gov Privacy Policy Directory & Phone Numbers Help

A message will appear in the tool bar at the top of the page indicating the "Record successfully inserted" once the action is completed.

Division for Children, Youth and Families
Child Development Bureau

Child Care Billing

Login > Provider Home > Maintain Group Logout

Record successfully inserted.

Provider Name: 93506 PALM TREE CHILD CARE Tel. No.: (603) 999-9999 Resource ID: 93506
Address: 256 RIALTO Avenue Concord, New Hampshire 03301- Service: License Family Home

Group - New Submit Clear Back Home

*Required Field

*Group Name :
Group Description :

Submit Clear Back Home GR01-NE01

NH Gov Privacy Policy Directory & Phone Numbers Help

Click the "Submit" button after entering each group. Continue adding groups from this page.

The "Submit" button saves any information entered into the text boxes.

The "Clear" button deletes information entered into the boxes. (The Clear button only functions before the Submit button is clicked).

Click the "Back" button to return to the existing "Group List" page.

Click the "Home" button to return to the Provider Home page.

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES March 10, 2014 10:39 AM
Eileen.Z.Precious

Division for Children, Youth and Families
Child Development Bureau

Child Care Billing

Login > Provider Home > **Maintain Group**

Record successfully updated.

Provider Name: 93506 PALM TREE CHILD CARE Tel. No.: (603) 999-9999
Address: 256 RIALTO Avenue Concord, New Hampshire 03301-

Group - Edit Submit Cancel Back Home

Group Name : Zzz-Group
Group Description : No longer in care

Submit Cancel Back Home

NH Gov Privacy Policy Directory & Phone Numbers Help

Note: Providers may find it helpful to create a group that will be the last group alphabetically in the group list so that children who are no longer in attendance can be placed in this group. The group name "Zzz-Group" usually works well.

Maintain Group

Once groups have been created the Group-List page will launch from the Provider Home page when "Create/Maintain Group" is selected.

Note: The provider groups may continue on subsequent pages. Groups can be edited or deleted from this screen.

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES February 20, 2014 08:06 AM
Margaret.C.Julian

Division for Child Development

Child Care Billing

Login > Provider Home > **Group List** Logout

Provider Name: 93506 PALM TREE CHILD CARE Tel. No.: (603) 999-9999 Resource ID: 93506
Address: 256 RIALTO Avenue Concord, New Hampshire 03301- Service: License Family Home

Group - List New Back Home

Group Name	Group Description	Action	Delete
Butterflies	Infants	Edit	Delete
Dragonflies	Toddlers	Edit	Delete
Z-Group	No longer in care	Edit	Delete

New Back Home GR01-R01

NH Gov Privacy Policy Directory & Phone Numbers Help

➤ Manage Groups

When the provider clicks on **Manage Group** from the home page, the Child List page launches. If the page is launched before groups are created, the children will appear in the list, but no group name will display (such as [no group selected]) and no group names will appear in the drop down box.

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES
 February 14, 2014 10:24 AM
 DrettG.Z.Kittenkat

Division for Children, Youth and Families
 Child Development Bureau

Child Care Billing

Login > Provider Home > Group Child List

Provider Name: 93505 BROOKRIDGE CHILD CARE CENTER Tel. No.: (603) 999-9999 Resource ID: 93505
 Address: 123 GOLF COURSE Lane Concord, New Hampshire 03301- Service: Licensed Center

Child List

Last Name	First Name	Rid Number	Group
JOY	CHARITY	125456897	[no Group selected]
LOCKE	HEIDI	125785698	[no Group selected]
MCGREGOR	SLAYDEN	526245225	[no Group selected]
MINCE	RUTH	525254512	[no Group selected]
PREACH	CAROL	452145252	[no Group selected]
RIVERS	JERICO	5212521228	[no Group selected]
RIVERS	LUMEN	568566585	[no Group selected]
ROBERT	EVELYLN	125212525	[no Group selected]
WALTER	BOB	524524528	[no Group selected]
WOODARD	WILDA	455252125	[no Group selected]

This page displays the list of children currently linked to the provider. Children are sorted by "Group", then "Last Name", then "First Name". Children, who have not been assigned to a group, will automatically be placed in "[no Group selected]".

The drop down box "Group" contains an alphabetical list of all groups created by the provider. Once the provider clicks on the down arrow, the list will display and the currently assigned group will be highlighted. Move the cursor to highlight the desired group name then click on that name to select the new group where you want the child placed.

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES
 March 10, 2014 10:43 AM
 Eileen.Z.Precious

Division for Children, Youth and Families
 Child Development Bureau

Child Care Billing

Login > Provider Home > Group Child List

Provider Name: 93506 PALM TREE CHILD CARE Tel. No.: (603) 999-9999 Resource ID: 93506
 Address: 256 RIALTO Avenue Concord, New Hampshire 03301- Service: License Family Home

Child List

Last Name	First Name	Rid Number	Group
DARDY	STEFANI	12587896	[no Group selected]
CARTER	CAROL		[no Group selected]
	CHERISH		[no Group selected]

Click to select the new group

All children can be placed in groups before clicking the "Save" button. One click on the "Save" button will save all actions executed on the page.

Since children will remain in the group list for 90 days from the date the link ends, children can be put in either the [no Group selected] group or in the provider created "Zzz-Group" once they leave the provider's care. Children in [no Group selected] will remain at the top of the list on the Child List page and cannot be selected "By Group" from the "Child Claim Search" screen. Children in the special "Zzz-Group" will display at the bottom of the Child List page and can still be selected "By Group" from the "Child Claim Search" screen.

Please Note: It is important to note that the Group Name will be alphabetized by 'case' i.e. capital letter verses lower case letter.

A message will appear in the tool bar at the top of the page indicating "Children Added To Group Successfully" once the action is completed.

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES
 March 10, 2014 10:46 AM
 Eileen.Z.Precious

Division for Children, Youth and Families
 Child Development Bureau

Child Care Billing

login > Provider Home > Group Child List Logout

Children Added To Group Successfully.

Provider Name: 93506 PALM TREE CHILD CARE Tel. No.: (603) 999-9999 Resource ID: 93506
 Address: 256 RIALTO Avenue Concord, New Hampshire 03301- Service: License Family Home

Child List

Save Cancel Back Home

Last Name	First Name	Rid Number	Group
DARDY	STEFANI	12587896	[no Group selected]
CARTER	CAROL		Fireflies
HYMN	CHERISH		Fireflies
DAINE	JACQUI		Zzz-Group

To view all children on this page, click on the scroll bar on the right side of the screen.

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES
 March 10, 2014 2:09:49 PM
 Dretti.Z.Kittenkat

Division for Children, Youth and Families
 Child Development Bureau

Child Care Billing

login > Provider Home > Group Child List Logout

Provider Name: 93505 BROOKRIDGE CHILD CARE CENTER Tel. No.: (603) 999-9999 Resource ID: 93505
 Address: 123 GOLF COURSE Lane Concord, New Hampshire 03301- Service: Licensed Center

Child List

Save Cancel Back Home

Last Name	First Name	Rid Number	Group
DAINE	JACQUI		[no Group selected]
QUIMBY	VOX	125689785	[no Group selected]
SVENSSON	TAGE		[no Group selected]
WALTER	BOB	524524528	[no Group selected]
RIVERS	JERICO	5212521228	Butterflies
ROBERT	EVELYLN	125212525	Butterflies
JOY	CHARITY	125456897	Dragonflies
LOCKE	HEIDI	125785698	Dragonflies
RIVERS	LUMEN	5685665851	Dragonflies
MCGREGOR	SLAYDEN	526245225	Fireflies
	RUTH	525254512	Fireflies
	CAROL	452145252	Fireflies
	WILDA	455252125	Zzz-Group

Children not yet added to a Group display at the top of the list

Children display in alpha order within each group

Zzz-Group for children no longer in care

Groups display in alpha order

Scroll bar

4. DHHS CHILD DEVELOPMENT BUREAU (CDB) FORMS LIBRARY URL

➤ <http://www.dhhs.state.nh.us/DHHS/CDB/LIBRARY/Form/default.htm>

DHHS Child Development Bureau (CDB) maintains the CDB forms library on the DHHS website. All child care forms are form fillable and printable. However, forms cannot be submitted electronically. Forms must be completed based on the form's instructions and mailed to the address indicated on the instructions of each form.

Exception:

The child care provider linking form, Form 1863 Child Care Provider Verification must be mailed to:

DHHS
Central Scanning Unit
P.O. Box 181
Concord, N.H. 03301

Child care forms may be downloaded from selecting the Forms Library link on the Provider Home page or using this web address: <http://www.dhhs.state.nh.us/DHHS/CDB/LIBRARY/Form/default.htm>.

NOTES

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